Peninsula Spay/Neuter Fund 907-690-2723

Application for Assistance

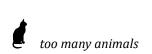
- Assistance is for residents on the Kenai Peninsula who cannot afford to spay or neuter their dog or cat on their own and based on the available funds. If you are requesting assistance for more than one pet, complete a separate application for each one. Assistance will not be provided if you are having your cat declawed.
- 2) Send Completed Application to: Peninsula Spay/Neuter Fund P.O. Box 750 Kenai, AK 99611

or Email to: peninsulaspayneuterfund@gmail.com (do not email a "picture" of the application).

3) When your application is received you will be contacted by a PSNF representative.

Your Name(s): Phone #:				
()		Home	Cell	
Mailing Address:				
Street or P.O. Box		City	Zip Code	
Name of Pet:	Cat Dog	_ Male Female	Age: Mths. / Yrs. (Circle one)	
Approximate Weight: lbs. Breed	d:	Color/Markings:		
Where did you get your pet? Breeder Note on Bulletin Board Craig's List	• .			
In order for the Fund to offer ass	istance please sign and date	the declaration below	v:	
I have read this application and I ar or neutered on my own. I understa funds are obtained through fund ra the homeless pet population here o provided by the Fund and assista responsibility for the animal and I ar	m applying for financial assistant and the Fund is able to offer assisting and donations from concern the Peninsula. I understand I ance is only to help with the concern the restand to help with the concern and the same and the same are the same and the same and the same are th	nce because I cannot a sistance when funds erned community citize am responsible for all	afford to have my pet spayed are available and that those ens who want to help reduce I charges beyond the amount	

THANK YOU FOR BEING RESPONSIBLE BY HAVING YOUR PET SPAYED OR NEUTERED In the future, if you find yourself in a position to do so, please consider donating to the Fund



Owner's Signature





Date