

Lakeshore Humane Society

Spay/Neuter Assistance Program Application

Name: _____

Address: _____

City/State/Zip: _____

Phone #: _____

Number of dogs needing spay/neuter: _____

Number of cats needing spay/neuter: _____



Voucher Fees:

\$40/cat

\$80/dog

Waiver of Liability

We/I, the owner(s) of the animals receiving spay/neuter services, hereby fully and completely release and discharge all persons, agents, causes or actions, claims, demands, expenses, contents, suits, assertions, damages, and losses of any kind that pertain to the animal(s) being spayed/neutered, including death or injury.

I am aware that any additional expenses incurred, or services provided, are the responsibility of the pet owner, including, but not limited to additional charges for spaying/neutering an animal in heat or pregnant, and animals with only one or no descended testicles.

I understand that the Spay/Neuter Assistance Program is for the household pets of limited income pet owners only, per the qualification guidelines, and understand that the information provided is subject to verification prior to approval.

Signature: _____ Date: _____