

**SANTA ANA FRIENDS FOR THE ANIMALS (SAFA)  
SPAY/NEUTER VOUCHER APPLICATION**

Date \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Santa Ana, CA. Zip Code \_\_\_\_\_ Hm. Phone# \_\_\_\_\_ Day Time Phone# \_\_\_\_\_

Animal Name \_\_\_\_\_ Cat \_\_\_\_\_ Dog \_\_\_\_\_ Breed \_\_\_\_\_ Color \_\_\_\_\_ Sex: M / F (circle one)

Age \_\_\_\_\_ Weight \_\_\_\_\_ Pregnant: Y / N (circle one) Dog License # if any \_\_\_\_\_

Our funding providers require that we collect the following information; this information **will not** affect your eligibility for a voucher.

Household Size <input checked="" type="checkbox"/> <b>one</b>	Household Income <input checked="" type="checkbox"/> <b>one</b> that corresponds to household size				
1 person <input type="checkbox"/>	\$0-\$16,550 <input type="checkbox"/>	\$16,551-\$27,550 <input type="checkbox"/>	\$27,551-\$44,050 <input type="checkbox"/>	\$44,051 and above <input type="checkbox"/>	
2 persons <input type="checkbox"/>	\$0-\$18,900 <input type="checkbox"/>	\$18,901-\$31,500 <input type="checkbox"/>	\$31,501-\$50,350 <input type="checkbox"/>	\$50,351 and above <input type="checkbox"/>	
3 persons <input type="checkbox"/>	\$0-\$21,250 <input type="checkbox"/>	\$21,251-\$35,400 <input type="checkbox"/>	\$35,401-\$56,650 <input type="checkbox"/>	\$56,651 and above <input type="checkbox"/>	
4 persons <input type="checkbox"/>	\$0-\$23,600 <input type="checkbox"/>	\$23,601-\$39,350 <input type="checkbox"/>	\$39,351-\$62,950 <input type="checkbox"/>	\$62,951 and above <input type="checkbox"/>	
5 persons <input type="checkbox"/>	\$0-\$25,500 <input type="checkbox"/>	\$25,501-\$42,500 <input type="checkbox"/>	\$42,501-\$68,000 <input type="checkbox"/>	\$68,001 and above <input type="checkbox"/>	
6 persons <input type="checkbox"/>	\$0-\$27,400 <input type="checkbox"/>	\$27,401-\$45,650 <input type="checkbox"/>	\$46,651-\$73,050 <input type="checkbox"/>	\$73,051 and above <input type="checkbox"/>	
7 persons <input type="checkbox"/>	\$0-\$29,300 <input type="checkbox"/>	\$29,301-\$48,800 <input type="checkbox"/>	\$48,801-\$78,050 <input type="checkbox"/>	\$78,051 and above <input type="checkbox"/>	
8 or more persons <input type="checkbox"/>	\$0-\$31,150 <input type="checkbox"/>	\$31,151-\$51,950 <input type="checkbox"/>	\$51,951-\$83,100 <input type="checkbox"/>	\$83,101 and above <input type="checkbox"/>	

Please place a check mark in the appropriate boxes for ALL three questions:

- Are you Hispanic? Yes  No
- Please  one that best describes you:  
 White  Black/African American  Asian  American Indian/Alaskan Native  Hawaiian/other Pacific Islander   
 American Indian/Alaskan Native & White  Asian & White  Black/African American & White   
 Amer. Indian/Alaskan Native & Black African Amer.  Multi Racial
- Are you a female head of household? Yes  No

**Please note that in order to receive a spay/neuter voucher you must submit a co-payment of \$15.00 per cat or \$25.00 per dog along with your application. Check should be made payable to “SAFA”**

Voucher is null and void if declawing, tail docking, ear cropping, or any other mutilation procedure is to be done at the time of spaying or neutering.

RELEASE AND WAIVER OF LIABILITY

THE SANTA ANA FRIENDS FOR THE ANIMALS (hereinafter “SAFA”) has developed a program whereby I may receive a voucher to take my animal to a participating veterinarian for spay/neuter services. (hereinafter “said Voucher Program”)

SAFA is also offering Avid® identification microchips. The cost of the microchip is \$35.00 including registration in PETtrac® national registry and injection by the veterinarian at the time of spay/neuter surgery. MICROCHIP PURCHASE IS OPTIONAL AND NOT REQUIRED to receive a spay/neuter voucher. If you wish to purchase a microchip please include a check with this application made payable to SAFA.

IN CONSIDERATION of participation in said Voucher Program, I hereby acknowledge, agree and represent the following:

- I UNDERSTAND THE SPAY/NEUTER SURGERY AND THE MICROCHIP IMPLANT PROCEDURES HAVE THE RISK OF COMPLICATIONS, INCLUDING DEATH, TO MY ANIMAL. I HEREBY ASSUME FULL RESPONSIBILITY FOR ANY RISK OF SICKNESS, INJURY OR DEATH of my animal due to my participation in said Voucher Program.
- I understand participation by any veterinarian in said Voucher Program is not a representation by SAFA of that participating veterinarian’s skills or a warranty of its services.

I HAVE READ AND VOLUNTARILY SIGN THIS RELEASE AND WAIVER OF LIABILITY, and further agree that no oral representations, statements or inducement apart from this written agreement have been made. I further attest that I am a resident of the City of Santa Ana and the above listed dog or cat is my pet.

Date \_\_\_\_\_ Signature \_\_\_\_\_ How did you hear about this program? \_\_\_\_\_

SAFA USE ONLY-Representative reviewing/verifying application:

Signature \_\_\_\_\_ Co-payment Received \_\_\_\_\_ Ch# \_\_\_\_\_ Issue date \_\_\_\_\_

Spay/Neuter Authorization # \_\_\_\_\_ Microchip Pyamnet Yes / No Check # \_\_\_\_\_ or Cash