

SPAY NEUTER APPLICATION

• Funding provided Arizona Companion Animal Spay and Neuter Pet Friendly License Plate GRANT Information on how you contribute or obtain the Arizona Companion Animal Spay and Neuter License Plate for your vehicle, go to the website www.azpetplates.org



Terms of Understanding: Funding is only for specific spay neuter surgery for feline/canine. Pet owners are responsible for any other direct fees (i.e. overweight, medication, other medical). Pet Owners are responsible to provide own transportation to and from selected location for spay neuter surgery in Kingman, Arizona at Humane Society Mohave County Animal Medical Center (Formally known as Low Cost Spay Neuter of Kingman).

Pre-Surgery Instruction: DO NOT FEED your pet after 10 PM the day before your pet's appointment. Water is ok to leave out. If your pet accidentally gets a small amount of food the day of surgery, discuss with staff upon arrival of your pets appointment.

Full Name:			First				Date:		
	Last	F	Irst			М.І.			
		Pe	t Owner	Informa	ation				
Address:									
	Mailing Address								
	City					State	ZIP Code		
	Ony					Olale	211 0000		
Phone:				Email					
Pet Information									
Name of Pe	et:								
	Weight:	(C	ircle) DC	DG CA	т	MALE FE	MALE		
Age of Pet:		VACCII	NATION H	ISTORY:					
		_							
Dog: Dister	nper/Parvo_	Bordetella	_ Rabie	s 🗌 (Mo	nth/Year):			
Cat: FVRC	P_ Feli	ne Leujemia 🗌	Rabies	🗌 (Mon	th/Year):				
INTERNAL	TRACKING AND	APPROVAL:							
ID NUMBER 2	23-		Approved	Disapprov	ed (circle)	Reason:_		_	
Authorized B	y:	Date:							
	EMAI	L APPLICATION T	O: anima	alcontrol@	hualapa	i-nsn.gov			



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- **Appointment:** It is IMPORTANT you keep your appointment for your pet's surgery