





1040 E. Main Street  PO Box 523  Clarksville, AR 72830  
479-754-4200

## Application For Spay/Neuter Voucher

Please mail in your application to the P.O. Box above, or email to  
[info@needypawsanimalshelter.org](mailto:info@needypawsanimalshelter.org)

Voucher Program Details: \$50 Dog Spay, \$40 Dog Neuter, \$40 Cat Spay, or \$20 Cat Neuter.  
Please fill out the following information and return this application to the above address.

Please Print Clearly:

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: AR ZIP: \_\_\_\_\_ Phone: \_\_\_\_\_

How many are in your family? \_\_\_\_\_  
Adults Children Dogs Cats Other Pets

Circle your Annual Household Income: Under \$30k Under \$50k Under \$75k Under  
\$100k Other: \_\_\_\_\_

Animal for which you are seeking this spay/neuter voucher.

\*\*\*\*\* Please note that only one animal should be written on each application. \*\*\*\*\*

Dog Named: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: Female or Male

Cat Named: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: Female or Male

If known, your chosen participating vet: \_\_\_\_\_

I swear/affirm that these answers are true and correct to the best of my knowledge.

Signature of owner responsible for pet: \_\_\_\_\_

**The voucher may be used at a participating vet, has no cash value, and is not transferable.**