

Low Cost Vet Care Voucher Program Application



Introduction

The Corrales Animal Services Low Cost Vet Care Voucher Program offers low cost vet care of dogs and cats for qualifying residents of the Village of Corrales. All vet care under this low cost voucher is provided by Corrales Veterinary Clinic. The voucher program is funded by Dennis Friends Foundation, grant money, and donations that go into a designated account to pay the veterinary clinic a reduced fee to perform services. The goals are to increase the number of pets spayed/neutered, reduce the number of unwanted litters, and help provide vet care that may not otherwise be received due to cost.

To be eligible a person must be at least 18 years old, be a resident of the Village of Corrales, and must be able to provide proof of income and residency

In addition, you must: (Initial Each)

- The dog(s) and/or cat(s) must live in the Village of Corrales. _____

-Agree to pay a 50% (of total bill), none-refundable, deposit to the veterinary clinic seven (7) days before the appointment. The deposit will go towards the total of the bill. If the deposited is not paid my appointment will be canceled. _____

-If you "no-call, no show" your appointment you will forfeit your voucher and no longer qualify for future vouchers. _____

-If you need to reschedule you must contact Corrales Animal Services or Corrales Veterinary Clinic at least 24 hours before your appointment. _____

Each voucher has a 30-day expiration date. Please only request the number of vouchers you will use within 30 days.

How to Apply

Complete, sign, and date the Application. Mail or drop off the completed application, proof of income, and residency, in an envelope to:

Corrales Animal Services

4324 Corrales Road Corrales, NM 87048

If approved, you will receive a call from Corrales Animals Service or Corrales Veterinary Clinic to schedule your appointment. If you have any questions please call Corrales Animal Services at 505-898-0401.

Full Name _____

Street Address _____

City _____ **State/Zip** _____

Phone number _____

Number of adults and/or children in household _____

Total household monthly gross income (before taxes) \$ _____

Name of Pet Dog/Cat Breed Sex Age Color

Proof of eligibility and residency is required:

1. Attach a copy of your proof of eligibility.
2. Attach a copy of any one of the following to prove residency at the address listed above: Utility bill (electric, phone, etc.), driver's license, or government issued photo ID.

I hereby certify that the information I have provided is truthful and correct to the best of my knowledge. I hereby agree to waive any and all claims for damages against Corrales Animal Services and Corrales Veterinary Clinic, its officers and employees in the event of death or injury to the animal during services provided. Furthermore, Corrales animal Services is not responsible for any additional charges beyond the services listed on the voucher. I understand that that if Corrales Veterinary Clinic determines that my pet is unmanageable, dangerous, vicious, wild or in any way demonstrates a potential to injure animal care staff, Corrales Veterinary Clinic reserves the right to refuse services. Corrales Veterinary Clinic reserves the right to refuse services to anyone.

Owner's Signature _____

Date _____