

Frequently Asked Questions

Q. Why should I spay or neuter my pet?

A. Pets that are not fixed are prone to undesirable and dangerous behavior. Unfixed cats and dogs are more likely to urinate on carpet and furniture. Unfixed dogs are more likely to bite or attack other animals. Also, fixing animals before their first heat cycle greatly reduces the chance of numerous cancers and improves the health and well-being of the animal. It prevents unwanted litters and financial cost to you, and saves countless lives. In short, spaying and neutering can help your pet live a longer, happier life, and make your life easier as well.

Q. How old should a pet be to get fixed?

A. Many vets spay or neuter pets at least two months old and weighing at least two pounds. Certainly by five months of age, all pets should be fixed to prevent unwanted litters and provide lasting health benefits.

Q. My pet is pregnant; can she still be spayed?

A. This is up to each individual vet; however, most will if early in pregnancy.

Q. Where is the closest veterinarian to me?

A. When we mail your SNAP certificate, we will include a list of participating veterinarians, or you can visit our website for more information.



How to Apply

- **Complete and sign** this application.
- Obtain **one money order** payable to SNSI for the total amount due (\$20 per pet x number of pets).
- **Provide proof of participation.**
- **Mail application, proof of qualification and money order** to SNSI. Within three weeks, you will receive a SNAP certificate (valid for three months) and list of participating veterinarians. You may then schedule an appointment **directly** with any veterinarian on the list. *If your application is not approved, you will receive a prompt refund.*

Incomplete applications or applications submitted without money order or proof of participation (step 3) will be returned.

Program Information

SNAP covers the cost of spay-neuter surgery. Your pet may need additional services such as disease testing and prevention or blood work as recommended by individual veterinarians. These services are not covered by the SNAP program.

Pets should receive annual wellness checks, vaccinations and permanent identification for long-term health and safety. Your pet's vaccinations should be current and can be done at the time of surgery or in advance through numerous low-cost resources. Visit our website or contact us for more information.

Contact Us

Spay-Neuter Services of Indiana (SNSI) is a non-profit organization whose mission is to eliminate the euthanasia of healthy and treatable cats and dogs.

SNSI

1100 W. 42nd St., Suite 205

INDIANAPOLIS, IN 46208

VOICEMAIL: (317) 767-7771

EMAIL: info@getthemfixed.org

FAX: (866) 771-0358

www.GetThemFixed.org



Get Them Fixed
FOR
\$20
Spay
Neuter
Assistance
Program

The Spay-Neuter Assistance Program (SNAP) is provided by Spay-Neuter Services of Indiana for Indiana households with limited incomes.

To apply, please fill out the application on the reverse.

For assistance, contact us at
(317) 767-7771
or info@getthemfixed.org

Spay-Neuter Services of Indiana, Inc. (SNSI) Spay-Neuter Assistance Program (SNAP)

It's a SNAP to apply! Complete these 4 easy steps



1 Complete and sign this application.



2 Obtain one money order payable to SNSI for the total amount due (\$20 per pet x number of pets).



3 EITHER provide proof of participation in one of the following Indiana public assistance programs. *Please block (mark out or white out) your Social Security number before mailing.*

- Energy Assistance Program
- Medicaid (**not** Medicare)
- Section 8 Housing
- Special Supplemental Nutrition Program for Women, Infants and Children (WIC)
- Social Security Disability (SSD) – NOT Social Security Retirement Income
- Food Stamps
- Public School Free Lunch Program
- Supplemental Security Income (SSI)

OR if you do not receive one of the above-listed benefits, you may qualify for SNAP if you meet the income guidelines below. Provide proof of income level by attaching either a copy of your most recent W2 form, the front page of income tax return, or your last pay stub. *Please block (mark out or white out) your Social Security number before mailing.*

# in Household		Gross Annual Income	Monthly	Biweekly	Weekly
1	Less Than	\$22,980	\$1,915	\$957	\$479
2	Less Than	\$31,020	\$2,585	\$1,293	\$647
3	Less Than	\$39,060	\$3,255	\$1,628	\$814
4	Less Than	\$47,100	\$3,925	\$1,963	\$981
For each additional person	Add	\$8,040	\$670	\$335	\$168

Number of persons living in household: _____
 Total Gross Household Income (before taxes): _____
 Check one: yearly monthly biweekly weekly



4 Mail application, proof of qualification and money order to:
 SNSI • 1100 W. 42nd St., Suite 205 • Indianapolis, IN 46208

PET OWNER'S INFORMATION (please print)

Pet Owner's Name: _____

Address: _____

City: _____ State: **IN** Zip: _____

County: _____ Phone: () _____

Email: _____

Do you have a coupon code? YES: (indicate code here) _____ NO

How did you hear about SNSI? _____

PET INFORMATION (attach an additional sheet for more pets)

Name: _____ Cat Dog Breed: _____

Male Female || AGE: Up to 5 months Adult || CHECK IF THIS ANIMAL WAS A STRAY

Name: _____ Cat Dog Breed: _____

Male Female || AGE: Up to 5 months Adult || CHECK IF THIS ANIMAL WAS A STRAY

Name: _____ Cat Dog Breed: _____

Male Female || AGE: Up to 5 months Adult || CHECK IF THIS ANIMAL WAS A STRAY

RELEASE AND INFORMATION CERTIFICATION

For value received, I/we the owner(s) of the above-designated cat(s) or dog(s), do hereby fully and completely release and discharge Spay-Neuter Services of Indiana, Inc. and all persons, agents, employees, directors and officers thereof and/or on its behalf liable from and against any and all actions, causes of action, claims, demands, assertions, contentions, suits, damages, expenses, and losses of any kind and description which in any manner pertain to, concern, involve or relate to the spaying or neutering of my/our pet(s), including such pet's death or injury, and I/we agree to indemnify and hold harmless all entities and persons being released hereunder from and against any and all actions, causes of action, claims, demands, assertions, contentions, suits, damages, expenses, and losses resulting from the foregoing activities.

By my signature I certify the following:

- I understand that SNSI's Spay-Neuter Assistance Program is for limited income pet owners per the qualification guidelines.
- The information provided with the application is accurate and complete.
- I understand that my application is subject to verification.

Signature of pet owner: _____ Date: _____