



P.O. Box 445, Fairfield, ME 04937-0445  
P.O. Box 8391, Bangor, ME 04402-8391

[www.saveourstraysinmaine.org](http://www.saveourstraysinmaine.org)  
(888) 772-3162

## **SAVE OUR STRAYS** **SPAY/NEUTER VOUCHER PROGRAM**

1. You must reside in either Kennebec, Somerset, or Penobscot county to be eligible. Some towns in Waldo County may be considered.
2. Enclosed is a list of veterinarians who have already agreed to accept our vouchers.
3. A voucher can only be used towards the cost of spay/neuter. Many veterinarians require an exam fee, vaccinations, or other procedures, either before or the same day as the spay/neuter procedure. Rabies vaccinations are required by the state of Maine and your veterinarian can advise you regarding the frequency of that rabies vaccine for your pet. **It is very important that you consult with your veterinarian, to understand what they require and your financial responsibility, before you make an appointment.**
4. Preference will be given to requests for female cats or female dogs.
5. If you currently receive financial aid from these programs (Maine Care, Food Stamps, SSI, TANF or SSD), please include a copy of that documentation. If you are a senior citizen and this animal is your primary companionship, please tell us.
6. There are other spay/neuter programs available in our state. We will make every attempt to match you up with the best program for your financial circumstances. In some cases, that may not be the Save Our Strays program. Documentation for other low cost spay/neuter programs may also be enclosed.
7. You must give the voucher to the veterinarian at the time of appointment. They will deduct the amount of the voucher from your invoice total and Save Our Strays will reimburse the veterinarian directly for the amount of your voucher.
8. The voucher amount is **\$50** and is only valid towards the cost of spay/neuter surgery. It cannot be used for any other services.
9. Spay/neuter vouchers are limited to TWO animals per household per calendar year.  
**Submission of an application does not guarantee that Save Our Strays will issue a voucher.**
10. Please sign and date the application. Mail to SOS, PO Box 8391, Bangor, ME 04402-8391
11. If you have not heard from us regarding your application within 2-3 weeks, please call our toll-free number (888-772-3162) and leave a message in Mailbox 2. Mail does get lost and we may not have received your application.



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## Application for Spay/Neuter Voucher

*Please fill out this application as completely as possible. Any missing information will only delay the process and could very likely move your application to the bottom of any outstanding requests.*

*Spay/neuter vouchers from Save our Strays can only be applied to the spay/neuter surgery.*

***The cost of vaccinations, office visits/exams, the balance of the spay/neuter procedure, and any other veterinary services will be your financial responsibility.***

Name \_\_\_\_\_ Home phone: \_\_\_\_\_  
 Mailing address \_\_\_\_\_  
 \_\_\_\_\_ Best time of day to call \_\_\_\_\_  
 Email address \_\_\_\_\_  
 \_\_\_\_\_ (If we need more information)

### Spay/neuter vouchers are limited to TWO pets per household:

Name of 1<sup>st</sup> pet \_\_\_\_\_ Breed \_\_\_\_\_ Age \_\_\_\_\_

Type of pet: (check one)  Female cat  Male cat  Female dog  Male dog

Name of 2<sup>nd</sup> pet \_\_\_\_\_ Breed \_\_\_\_\_ Age \_\_\_\_\_

Type of pet: (check one)  Female cat  Male cat  Female dog  Male dog

❖ ***Please share the details of how your pet(s) became members of your family. Use the back of this application, if necessary. This section MUST be completed.***

❖ *Do you currently receive any financial aid from one of these programs (Maine Care, Food Stamps, SSI, SSD, TANF)? If yes, please include supporting documentation.*

❖ *How did you become aware of our spay/neuter voucher program? Please be specific.*

❖ *Which veterinarian would you prefer to use? Please consult the attached list of veterinarians who currently accept our spay/neuter vouchers.*

*I have completed the questions above truthfully and to the best of my ability. I understand that submission of this application does not guarantee that Save our Strays will provide a spay/neuter voucher to me.*

**Signature of animal guardian** \_\_\_\_\_ **Date** \_\_\_\_\_

**Mail request to: Save our Strays, PO Box 8391, Bangor, ME 04402-8391**