



spay • neuter • advocate • volunteer

shawpbr

SHAW PIT BULL RESCUE

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application for spay/neuter voucher program

You may apply to have up to (3) pit bull-type dogs spayed or neutered within a 12 month period. A new application is required annually, or for additional dogs not listed below.

Please complete and return with photo of dog(s) to:

Shaw PBR • 158 Center Road
Columbus, MS 39702

Multiple photos required. Pics can be uploaded via shawpbr.org or emailed to snvp@shawpbr.org

Date:

Name:

Address: City, State & Zip:

Phone: Email:

Name of person to drop-off/pick-up dog(s) for surgery:

Approved Alternate(s):

#1:	<input type="text"/>	Desc.	<input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> F	Age	<input type="text"/>	Weight	<input type="text"/>
#2:	<input type="text"/>	Desc.	<input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> F	Age	<input type="text"/>	Weight	<input type="text"/>
#3:	<input type="text"/>	Desc.	<input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> F	Age	<input type="text"/>	Weight	<input type="text"/>

I hereby certify I am the owner of the dog described above; I am authorized by the eligible owner to present the dog for the procedure; or I rescued this dog and have followed the proper procedures and time frame to locate its owner. I hereby consent to the surgical spaying or neutering of the dog(s) at Animal Clinic of Columbus. I understand it is my responsibility to call to schedule the surgery; and, if required, that I am responsible to pay for any extra services. I understand I need to follow pre-surgical and post-surgical care instructions given to me by the surgery provider; and that there are inherent risks involved in medical procedures and surgery.

I understand that if I do not keep my scheduled appointment with Animal Clinic of Columbus - or fail reschedule at least 24 hours in advance - that the voucher becomes null and void and I will need to reapply. I agree to pick up my dog(s) at the designated time; and understand if I have not picked up my dog within 24 hours of that time, my dog will be transferred to Animal Control.

This agreement expires 90 days from the date of approval. I agree to update Shaw PBR if my contact information changes, or if I decide not to follow through with the spay/neuter surgery.

Signature of Dog Owner/Authorized Party

Shaw PBR Representative

OFFICE USE ONLY

SPAY (\$80.00) _____ NEUTER (\$60.00) _____

APPROVAL DATE

VOUCHER #

EXPIRATION DATE

TOTAL AMOUNT NOT TO EXCEED

Help Us Save Lives! ADOPT...DONATE...EDUCATE

158 CENTER ROAD • COLUMBUS, MS 39702 • 662.386.SHAW (7429) • FAX 662.368.1482
SNVP@SHAWPBR.ORG • SHAWPBR.ORG • ALL SOCIAL MEDIA @ShawPBR