

**APPLICATION FOR FINANCIAL AID**  
**FOR PET SPAYS / NEUTERS / GENERAL CARE**

**Sponsored by Second Chance Animal Advocates**

No obligation. By filling out this form, you are stating a **NEED** for our help. Date: \_\_\_\_\_

(Please print) Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Cat Dog Other: \_\_\_\_\_ Male Female Service Needed: \_\_\_\_\_

Pet's Name: \_\_\_\_\_ Vet you wish to use \_\_\_\_\_

I need financial help because (confidential)  Low Income  Job Loss  Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

***For Office Use Only:***

Approval Signature : \_\_\_\_\_ Date: \_\_\_\_\_

**Procedure:**

1. Fill out application (must be complete) online or send to: SCAA Thrift, 603 W. Main St., Stoughton WI 53589
2. WE WILL CALL WITH A DECISION WITHIN A WEEK OF RECEIVING THE APPLICATION
3. Follow up their care with lots of love!

Email: [scaawi@yahoo.com](mailto:scaawi@yahoo.com) for additional information