

**Lucy's House for the Prevention of Homeless Pets
Keeping Families Together
Two Hearts- One Love
Medical Support Application for Animals**

Reason for medical request: _____

Name of Person: _____ **Date:** _____

Town of Residence: _____ **County:** _____

State: Vermont **Phone Number:** _____

Email address: _____

1. Does your pet have a veterinarian? Circle Yes No

If yes: List veterinarian name: _____

Vet Clinic or Practice: _____

Phone Number: _____

2. Is your pet up to date with shots and wellness visits? Circle Yes No

If yes: List dates of last visit and vaccinations. You may not have these entire vaccines just list what has been done.

Dog : Circle if: Spayed Neutered	Cat: Circle if: Spayed Neutered
Annual Visit:	Annual Visit:
Canine Influenza:	
Rabies:	Feline Leukemia:
Lyme:	Rabies:
Kennel Cough:	Distemper
Heartworm tested:	Heartworm:
Last flea treatment:	Last flea treatment:
Last heartworm preventive:	Heartguard for cats used:

If no: list any vaccines needed at this time? _____

Indicate if you will need flea or heartworm preventive products: Circle Yes No

We need to look at all expenses that may need to be covered and can sometimes help with these expenses. Flea and heartworm preventatives are proactive in preventing additional health issues.

Number of animals needing care: _____

Is care required for wellness visits and vaccinations? Circle Yes No

Sometimes we have other types of funding for this purpose. Many times animals must have vaccinations so they are up to date in order to be seen by a veterinarian.

Is care required for emergency or an unexpected veterinarian visit? Circle Yes No

Name of Pet(s):

Dog: _____ Cat: _____

Dog: _____ Cat: _____

3. We work with a variety of veterinarians. If you have an established veterinarian we attempt to work with that veterinarian but expect veterinarians to reduce their fees. If your vet does not reduce fees we may ask you to use a veterinarian that provides discounts to Lucy's House. A list of these are available.
4. **If follow-up or second visits are recommended by the veterinarian it is the pet owner's responsibility to obtain pre-authorization for funding from Lucy's House for that visit. Due to the number of requests we receive, Lucy's House authorizes funding for one veterinarian appointment at a time, and delayed or rescheduled appointments may not be funded.**
5. Low cost options for spay and neuter are through VSNIP (the Vermont Spay Neuter Initiative Program) or VT-Cans in Middlesex. Rabies clinics are held in most towns either when dog licensing is due or in the fall. Many humane societies offer this service as well. This helps us to focus on emergency veterinarian costs for pets.
6. Do you receive any public assistance? Check off any that apply and show proof of any checked off below through letters from state assistance or federal programs. A photo ID. is required to verify identity.

Social Security: _____ SSI: _____ 3 Squares: _____ Fuel assistance: _____

Medicaid: _____ Medicare: _____ Other State or Federal Assistance Program: _____

7. Do you fit in any of these categories? We keep track of this for grant funding. It could help us to provide you with additional resources when available. Check off below:

Senior Citizen: _____ Disabled: _____ Veteran: _____ Laid Off/Unemployed: _____

Pictures are required of pets who receive our medical funding. In signing this form you agree to provide Lucy's House with pictures of pets receiving medical support prior to receiving veterinary care. Names of pets can be changed if requested. Failure to comply with this request means the owner of the pet will be required to reimburse Lucy's House the funds provided.

Signature of Owner: _____ Date: _____

Picture of Pet or Pets Provided: Yes No