



# Paradise Garden Animal Haven

598 KENT HILL RD. | WOODHULL, NY 14898 | (607) 458-5785

WWW.PARADISEGARDENANIMALHAVEN.ORG | PARADISEGARDENAH@YAHOO.COM

## LOW-COST SPAY & NEUTER PROGRAM FOR CATS AND DOGS

High quality, low cost spay/neuter services are available to area residents for their cats and dogs. Veterinary services are provided by Shelter Outreach Services of Ithaca. **Our clinics are intended for area residents who cannot afford the spay/neuter fees charged at their veterinarians' offices due to financial difficulties or due to having multiple dropped-off/stray animals in need of altering.**

Spay/neuter clinics are held four to five times every month at the Chemung Co. SPCA building on Route 352 between Big Flats and Elmira. Each clinic will accommodate about 22 cats and 8 dogs.

Please complete the application **and** price list forms, and send them to us by mail **along with your check or money order**. You may also email forms to **paradisegardenah@yahoo.com** or pay through PayPal using the DONATE button on the website. Please note in the comment box the name of the pet for whom the payment is being made. We will contact you by phone to set up an appointment.

**Low-income New York State residents** may qualify for an ASPCA grant to cover most of the cost of their pets' surgeries. **To qualify for the grant, we require income information. Please send copies of the following documents: (a) If you receive SNAP: all pages of your SNAP determination letter; or (b) If you don't receive SNAP, and Social Security is your ONLY income: your social security statement; or (c) the first page of your current federal tax return. You must sign a statement indicating that you have disclosed all sources of income.** Other forms of eligibility may be viewed on our website. If you qualify for the grant, you will pay \$10 per animal along with the cost of vaccinations. **You must include payment of \$10 plus the cost of vaccinations needed (\$7.50 or \$15).** If you have questions, please call or email for further information regarding documents needed.

| <b>FEE SCHEDULE</b> | <b>Cats</b> | <b>Dogs</b> |
|---------------------|-------------|-------------|
| <b>Female</b>       | \$65        | \$95        |
| <b>Male</b>         | \$45        | \$75        |

*Note: Add \$10 for dogs over 75 lbs. and \$20 for dogs over 100 lbs.*

Prices include a physical exam and a nail trim for dogs (you must request a trim for cats). *Rabies and distemper shots are \$7.50 each, and are **REQUIRED**, so please include payment for both or proof of up-to-date shots.* Other services (e.g. flea, wormer, or ear mite treatment) are available for a small charge for scheduled animals. Conditions discovered during the physical exam or surgery that require additional medical care, such as pregnancy, hernia, cryptorchid, pyometra, etc., may result in additional charges. Microchips are available for scheduled animals for \$15 each.

**Paradise Garden Animal Haven is actively seeking business sponsorships to support our Spay & Neuter Clinics. We encourage all our supporters to please donate today!**



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## SPAY/NEUTER CLINIC APPLICATION

| Applicant's Contact Information |                    |
|---------------------------------|--------------------|
| First Name: _____               | Last Name: _____   |
| Address: _____                  |                    |
| City, State: _____              | Zip, County: _____ |
| Home Phone: (        ) _____    |                    |
| Cell Phone: (        ) _____    |                    |

| Animal Information - #1                                                                                                                                                                                   | <input type="checkbox"/> Dog <input type="checkbox"/> Cat | <input type="checkbox"/> Male <input type="checkbox"/> Female           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------------|
| Name: _____                                                                                                                                                                                               | Breed: _____                                              | Weight (dog): _____                                                     |
| Color: _____                                                                                                                                                                                              |                                                           | Age: _____ <input type="checkbox"/> Yrs. <input type="checkbox"/> Mths. |
| Vaccination History   Distemper <input type="checkbox"/> Never <input type="checkbox"/> Previous <input type="checkbox"/> Up-to-Date                                                                      |                                                           | <b>SHOTS ARE REQUIRED. Attach copy of vet records, if up-to-date.</b>   |
| Rabies <input type="checkbox"/> Never <input type="checkbox"/> Previous <input type="checkbox"/> Up-to-Date                                                                                               |                                                           |                                                                         |
| Has your animal ever been to a veterinarian? <input type="checkbox"/> No <input type="checkbox"/> Yes                                                                                                     |                                                           |                                                                         |
| Where did you get your pet? <input type="checkbox"/> Shelter <input type="checkbox"/> Stray/Found <input type="checkbox"/> Own Litter <input type="checkbox"/> Gift <input type="checkbox"/> Other: _____ |                                                           |                                                                         |
| Has your animal ever had a litter? <input type="checkbox"/> No <input type="checkbox"/> Yes     If yes, how many?                                                                                         |                                                           |                                                                         |

| Animal Information - #2                                                                                                                                                                                   | <input type="checkbox"/> Dog <input type="checkbox"/> Cat | <input type="checkbox"/> Male <input type="checkbox"/> Female           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------------|
| Name: _____                                                                                                                                                                                               | Breed: _____                                              | Weight (dog): _____                                                     |
| Color: _____                                                                                                                                                                                              |                                                           | Age: _____ <input type="checkbox"/> Yrs. <input type="checkbox"/> Mths. |
| Vaccination History   Distemper <input type="checkbox"/> Never <input type="checkbox"/> Previous <input type="checkbox"/> Up-to-Date                                                                      |                                                           | <b>SHOTS ARE REQUIRED. Attach copy of vet records, if up-to-date.</b>   |
| Rabies <input type="checkbox"/> Never <input type="checkbox"/> Previous <input type="checkbox"/> Up-to-Date                                                                                               |                                                           |                                                                         |
| Has your animal ever been to a veterinarian? <input type="checkbox"/> No <input type="checkbox"/> Yes                                                                                                     |                                                           |                                                                         |
| Where did you get your pet? <input type="checkbox"/> Shelter <input type="checkbox"/> Stray/Found <input type="checkbox"/> Own Litter <input type="checkbox"/> Gift <input type="checkbox"/> Other: _____ |                                                           |                                                                         |
| Has your animal ever had a litter? <input type="checkbox"/> No <input type="checkbox"/> Yes     If yes, how many?                                                                                         |                                                           |                                                                         |

| Animal Information - #3                                                                                                                                                                                   | <input type="checkbox"/> Dog <input type="checkbox"/> Cat | <input type="checkbox"/> Male <input type="checkbox"/> Female           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------------|
| Name: _____                                                                                                                                                                                               | Breed: _____                                              | Weight (dog): _____                                                     |
| Color: _____                                                                                                                                                                                              |                                                           | Age: _____ <input type="checkbox"/> Yrs. <input type="checkbox"/> Mths. |
| Vaccination History   Distemper <input type="checkbox"/> Never <input type="checkbox"/> Previous <input type="checkbox"/> Up-to-Date                                                                      |                                                           | <b>SHOTS ARE REQUIRED. Attach copy of vet records, if up-to-date.</b>   |
| Rabies <input type="checkbox"/> Never <input type="checkbox"/> Previous <input type="checkbox"/> Up-to-Date                                                                                               |                                                           |                                                                         |
| Has your animal ever been to a veterinarian? <input type="checkbox"/> No <input type="checkbox"/> Yes                                                                                                     |                                                           |                                                                         |
| Where did you get your pet? <input type="checkbox"/> Shelter <input type="checkbox"/> Stray/Found <input type="checkbox"/> Own Litter <input type="checkbox"/> Gift <input type="checkbox"/> Other: _____ |                                                           |                                                                         |
| Has your animal ever had a litter? <input type="checkbox"/> No <input type="checkbox"/> Yes     If yes, how many?                                                                                         |                                                           |                                                                         |

**Please include your payment with your application, or we can't give you an appointment.**



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## SPAY/NEUTER CLINIC PRICE LIST

**Rabies and distemper shots are required** unless you can show proof of vaccination. Please send proof of vaccination(s) with your application.

Please return this form with your spay/neuter application and your check or money order made payable to Paradise Garden Animal Haven. You can also pay online using the "Donate" button on the website—just put what services are being purchased in the comment box when you submit your payment. We will schedule your pet in a clinic once payment is received.

If you are applying for the ASPCA grant, please put \$10 in the column, "Your Cost," instead of the listed price for spay/neuter. The balance will be due if you do not qualify or ASPCA grant funds are not available. Please consider making a tax-deductible donation to help us in our efforts to spay and neuter stray and feral cats.

| Service                      | # of Animals | Price           | Your Cost |
|------------------------------|--------------|-----------------|-----------|
| <b>Cat Spay (female)</b>     | _____ x      | <b>\$65.00</b>  | = _____   |
| <b>Cat Neuter (male)</b>     | _____ x      | <b>\$45.00</b>  | = _____   |
| <b>Dog Spay (female)</b>     | _____ x      | <b>\$95.00</b>  | = _____   |
| Dog Weighs 75 – 100 lbs.     | _____ x      | \$10.00         | = _____   |
| Dog Weighs Over 100 lbs.     | _____ x      | \$20.00         | = _____   |
| <b>Dog Neuter (male)</b>     | _____ x      | <b>\$75.00</b>  | = _____   |
| Dog Weighs 75 – 100 lbs.     | _____ x      | \$10.00         | = _____   |
| Dog Weighs Over 100 lbs.     | _____ x      | \$20.00         | = _____   |
| <b>Distemper Vaccination</b> | _____ x      | <b>\$7.50</b>   | = _____   |
| <b>Rabies Vaccination</b>    | _____ x      | <b>\$7.50</b>   | = _____   |
| <b>Microchip</b>             | _____ x      | <b>\$15.00</b>  | = _____   |
|                              |              | <b>Donation</b> | = _____   |
|                              |              | <b>Total</b>    | = _____   |

The clinics primarily take place on Thursdays and Sundays. You drop your pets off between 7:30am – 8:00am in the morning. Do you have a preference?  No Preference  Thursday  Sunday

Your signature is required to complete the application:

**"I understand that the clinics are intended for area residents who cannot afford the spay/neuter fees charged at their veterinarians' offices due to financial difficulties or due to having multiple dropped-off/stray animals in need of altering."**

Your Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Notes:



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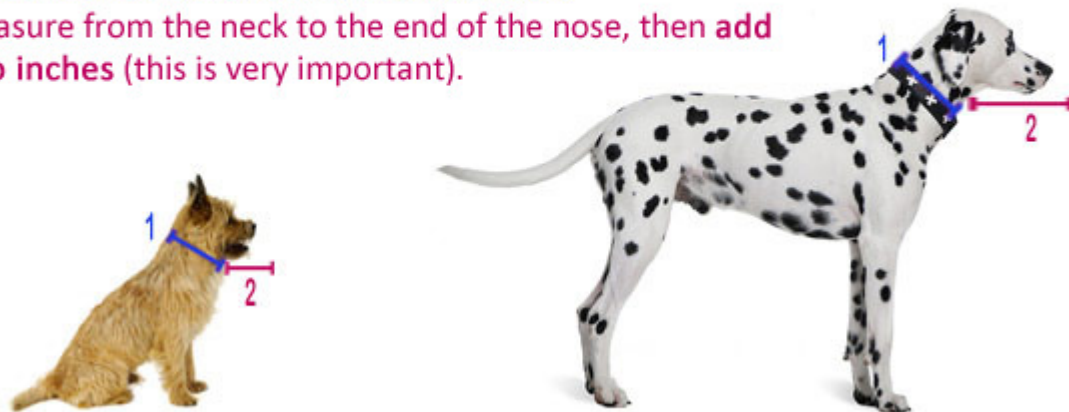
## HOW TO BUY THE CORRECT SIZE E-COLLAR

To provide the best protection and healing for your pet, it is crucial to buy the correct size Elizabethan Collar, or “e-collar.” To find the right size e-collar, you will need to take two measurements: 1) the size in inches around their neck; and 2) the size in inches from the neck to the snout, *plus two inches*. **The second measurement (neck to snout) is the most crucial as the collar needs to extend beyond the nose to provide effective protection.** If your dog or cat’s nose is sticking out of the end of the cone, they may be able to reach the affected areas.

The cone must go past your pet’s nose or he will be able to reach the area that needs protection. If your pet is in between two sizes, it can be best to go with correct neck-to-snout size. For added protection, the e-collar can be secured by threading a collar or a gauze bandage through the collar loops. It is very important to supervise your dog or cat when using any e-collar, especially for the first time.

## How to Measure Your Pet

1. Measure around the neck (circumference).
2. Measure from the neck to the end of the nose, then add two inches (this is very important).



E-collars for cats can be made from household items such as butter or cool whip containers, paper plates, Styrofoam bowls, or anything that is the right size to keep the cat from licking the surgery site.

