



Low Income Program Requirements

The Richmond Animal League's Loving Spay + Neuter Clinic offers low income assistance for spay and neuter of dogs and cats. There are no geographical restrictions. The program covers the cost of spay/neuter surgery and age appropriate rabies vaccination. All other tests/vaccines and procedures would be at normal low cost to the owner. See RAL.org for full services and fees.

Requirements:

- Household Income \$25,000 or less
- Dogs or cats only
- Pets must be over 2 lbs and 2 months of age (3 months of age for rabies vaccine) •
- Pets must be healthy for surgery
- 3 pets per household / year. You can reapply each year.

Documentation Needed:

- Filed tax return from current or previous year showing household income \$25,000 or less

(If above not available)

- Current Statement of Government Benefits such as:
 - Supplemental Security Income (SSI)
 - Disability
 - Supplemental Nutrition Assistance Program (SNAP)

How to Apply/Submit Paperwork:

- 1) Attach most current approved statement from list above
- 2) Fill out Loving Spay+Neuter Clinic Low Income Application (see other side)
- 3) Black out any Social Security Numbers if on paperwork.
- Fax to 804-379-4096
- OR
- Email to Clinic@ral.org
- OR
- Come to clinic in person Monday thru Friday 10am to 2 pm
- OR
- Mail Copy of paperwork to:
 - Loving Spay+ Neuter Clinic
 - LI Program
 - 11401 International Drive
 - Richmond, VA 23236

Once the proper paperwork is submitted and approved, please follow the instructions on our website under Request for Appointment.



Clinic Staff Use: (MM/DD/YYYY)

Date Received: _____ Received by: _____

Date Approved: _____ Approved by: _____

Date Scheduled: 1. _____ 2. _____ 3. _____

Low Income Application Form

(MM/DD/YYYY): _____

Owner Name: _____

Address: _____ City: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

Type of Financial proof attached: Filed Tax Return SSI Disability SNAP Other: _____

Up to 3 pets per year:

1. Pet Name _____ Age: _____ Cat /Dog: Breed _____

Male/ Female: _____ Weight (approx.) _____

2. Pet Name _____ Age: _____ Cat /Dog: Breed _____

Male/ Female: _____ Weight (approx.) _____ 3. Pet

Name _____ Age: _____ Cat /Dog: Breed _____ Male/

Female: _____ Weight (approx.) _____

How will this grant/program help your family or pets?

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This assistance is made possible through granting opportunities along with public donations.

Often for grants, we need to submit a pet's story and photo to continue the funding.

**May we submit photos and/ or situational info for grant programs? May we post your pet's
photo on Facebook or other Social Media? Yes No**