



# Elmore SPCA, Inc.

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Elmore SPCA Office Use Only
Voucher #: _____
Date Issued: _____
Date Returned: _____
_____

## Spay/Neuter Incentive Program (SNIP) Application

**Section I—General Information. To be completed by all applicants. (Please clearly print all completed sections of application.)**

Owner's Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ County: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Animal's Name: \_\_\_\_\_  
Species: Cat / Dog Gender: Female / Male DOB (if known): \_\_\_\_\_ Age: \_\_\_\_\_  
Breed: \_\_\_\_\_ Color: \_\_\_\_\_

**Section II—Household Pet. Complete this section only if this voucher is for use for a pet. Otherwise, move to Section III Strays.**

List All Individuals in household 18 and over \_\_\_\_\_  
\_\_\_\_\_  
List of other pets in household: \_\_\_\_\_  
\_\_\_\_\_

**Section III—Stray. Complete this section only if this voucher is for use for a stray.**

Location of animal pickup:  
Town: \_\_\_\_\_ County: \_\_\_\_\_  
Address/Nearest Cross Street: \_\_\_\_\_  
If affiliated with rescue group, list name of rescue: \_\_\_\_\_

Completed applications must be brought to Elmore SPCA for processing. A limited number of SNIP Vouchers for spay/neuter will be issued each month.