

Kibble Supply 2012 Registration Form

Please fill out all information to the best of your ability. The information collected on this form will help us determine your needs and the needs of our community.

You will only be able to receive assistance for cats and dogs initially registered on this form.

If you cannot afford to care for the animals you currently have, we do not recommend that you obtain more.

Your Information:

Name: _____ Phone Number: _____

Address: _____

Street Number & Name
City
State
Zip Code

Why do you need assistance? (Please circle all that apply):

Lost Home
 Lost Job
 Low Income
 Student
 Unforeseen Medical Bills
 Disabled
 On Government Assistance
 Too Many Animals
 Other: _____

How did you hear about us? (Please circle all that apply):

Friend
 Neighbor
 Advertisement
 Vet Clinic
 Spay / Neuter Clinic
 Other: _____

Cat Information:

How many cats are you feeding that are already spayed or neutered? _____

How many cats are you feeding that are intact (not spayed or neutered yet)? _____

Are any of the cats that you are feeding tame cats that you would like to rehome? Yes No

Dog Information:

How many dogs are you feeding of the following sizes:

Weight as adult	Typical Breed	Number of dogs already spayed or neutered	Number of intact (not spayed or neutered) dogs
Up to 10 pounds	Chihuahua, Yorkshire Terrier, Toy Poodle		
10 - 25 pounds	Miniature Poodle, Scottish Terrier		
25 - 50 pounds	Cocker Spaniel, Beagle, Springer Spaniel		
50 - 75 pounds	Collie, Boxer, Labrador, Golden Retriever		
Over 75 pounds	Great Dane, Malamute, St. Bernard, Mastiff		

Pet Care Information:

Have you used our Kibble Supply program in the past? Yes No

Do you know that we offer a low cost spay and neuter & vaccination clinic? Yes No

Have you used this clinic in the past to spay/neuter or vaccinate your pets? Yes No

