



SPAY / NEUTER CLINIC APPLICATION

SPCA of Lake County
8025 Highway 29
Kelseyville, CA 95451

Mailing Address:
SPCA of Lake County
P.O. Box 784
Clearlake, CA 95422

707-279-1400 (call/text)
Email: spcaoflakecounty@aol.com

Pet Information:

Name: _____
Age: _____
Weight: _____ lbs

- Dog Cat
 Male Female

Pregnant? Y N Don't know

Breed: _____

Description (color/long or short
hair)

Health Concerns/Allergies
(include any medications):

Pet Owner Information:

Name: _____
Physical Address: _____

Mailing Address: _____

Phone: _____ Alternate: _____
Email: _____

Voucher # (if applicable): _____ (JARR/Animal Coalition)

Are you applying for more than one pet? Yes No
(Please use separate application for each pet.)

If you miss your appointment, there will be a rescheduling fee.
Dogs must be in carriers or on leash. Cats must be in carriers.
One animal per carrier – No exceptions. Must be current on rabies
vaccines.

Other services requested. See fee schedule.
 Rabies DHPP FVRCP Microchip

I understand that I am giving my consent for my cat or dog to be
spayed/neutered and vaccinated for rabies, if needed. I
understand that my pet must be healthy and old enough to receive
these services in the opinion of the examining veterinarian.

Owner's signature: _____
Date: _____

Mail or email completed application to the above address.

Fee Schedule

- Feline Spay -\$120 Feline Neuter-\$80
- Canine Neuter -\$100
- Canine Spay 25#<\$150
- Canine Spay 50#<\$170
- Canine Spay 50#>\$190
- Feline Rabies Purvax-\$20
- FVRCP-\$20
- Canine Rabies-\$15
- DHPP-\$20
- Microchip-\$20

For SPCA use only

Date Received:

Surgery Date:

Payment complete:

Date Contacted:

Animal ID #:

Paypal

Cash

Check

Paypal invoice:

Voucher

Billed _____