

Vet Care Angel Form

Your first and last name: _____

Who is the sponsorship for? Circle one:

MYSELF A GIFT FOR SOMEONE IN MEMORY OF SOMEONE A GROUP

Write the name that you want on your certificate and letter:

What address should we send your certificate, cat photo, and cat bio to?

Tick the box to the left of the category that you'd like to sponsor. You can choose more than one:

	<u>Cat-egory.</u>	<u>What does your donation cover?</u>
<input type="checkbox"/>	1. KITTEN - \$275	Covers neuter/spay, vaccinations, and preventative treatments
<input type="checkbox"/>	2. ADULT - \$275	
<input type="checkbox"/>	3. SENIOR - \$450	Covers all of the above costs plus bloodwork and dental to find issues common with older cats
<input type="checkbox"/>	4. SPECIAL NEEDS - \$1,500	Covers all of the above plus treatment of chronic illness or injury

Sometimes medical costs exceed our estimates. If your sponsor cat requires additional medical treatment, can we contact you? Circle one:

YES NO

If you said yes, what phone number or email address can we use to contact you?

Please mail back this form to P.O. Box 541435 Waltham, MA 02454 and enclose a check with the total corresponding cost of the categories that you chose. Thank you so much!