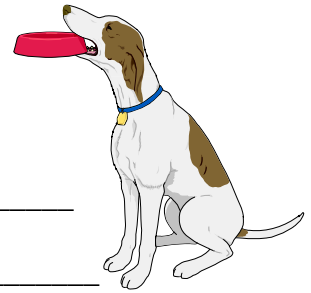


Application to Receive Pet Food Strafford and Seacoast Rockingham Counties



Name: _____

Street Address: _____

Mailing Address (if different): _____

City: _____ State: _____ Zip: _____

Day phone: _____ Evening phone: _____

Email address: _____

Information About Your Need for Assistance

Please check the form(s) of assistance you receive:

Please send us a photocopy or canceled stub as proof of your receiving aid.

- | | |
|---|--|
| <input type="checkbox"/> AFDC
<input type="checkbox"/> Food Stamps
<input type="checkbox"/> OAA - Old Age Assistance
<input type="checkbox"/> ANB - Aid to Needy Blind
<input type="checkbox"/> APTD - Aid to The Permanently and Totally Disabled
<input type="checkbox"/> Direct relief from your city or town | <input type="checkbox"/> Unemployed since _____
<input type="checkbox"/> Living entirely on Social Security
<input type="checkbox"/> Other (Please explain)

_____ |
|---|--|

Information on Pets: Fill in or circle response.

Pet Name: _____ **Dog or cat?** _____ **Breed:** _____ **M or F** _____

Spayed/neutered? Yes No **Age:** _____ **Weight:** _____

Pet Name: _____ **Dog or cat?** _____ **Breed:** _____ **M or F** _____

Spayed/neutered? Yes No **Age:** _____ **Weight:** _____

Pet Name: _____ **Dog or cat?** _____ **Breed:** _____ **M or F** _____

Spayed/neutered? Yes No **Age:** _____ **Weight:** _____

Types of food requested: Check those desired.

Canned cat food

Canned dog food

Soft-moist cat food

Soft moist dog food

Dry cat food

Dry dog food

Preferred brands: _____

Preferred brands: _____

Name and address of your veterinarian: _____

Information on obtaining food:

Can you pick up or have someone pick up your food at UNH? _____

Do you require that your pet food be delivered? _____

Do you have services come to your home on a regular basis? (e.g. Meals on Wheels, Homemakers) _____ If yes, please give us a contact name and phone number. (We may be able to coordinate delivery through them.)

Thank you for filling out this form. If your application is approved, you will be contacted about pick up and/or delivery times.

Please return to:

ELDERPET
Cole Hall, UNH
291 Mast Rd.
Durham, NH 03824