

**SAIN Animal Assistance Program Application**

Please use this application to send via email to SAIN at:

[**sain**.**aapkb@gmail.com**](mailto:sain.aapkb@gmail.com) or as guidance in writing a letter of

application.

**Requirements for eligibility**:

1) Private animal ownership (not a rescue, organization etc)

2) A safe home or facility exists to maintain the animals (site visit may be required)

3) Documented financial need due to unemployment or financial hardship

4) Recognition that by submitting this application you understand and authorize the verification of any information you have provided

**Applicant Information**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current or Former Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reason for Applying for SAIN Animal Assistance Program**:

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**What animals are you applying for (horses, livestock, small pets) and what care do you need? This program prioritizes hay, feed and/or vet care that alleviates suffering.**

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| --- | --- | --- | --- | --- |
| Animal type / Name | Age | Sex | How long owned | Type of Assistance Needed (feed / care ) |
|  |  |  |  |  |
|  |  |  |  |  |
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|  |  |  |  |  |

**Agreement**

I understand that I may not sell, give away, or transfer any hay or feed received from SAIN. If I have anything SAIN has provided leftover that I do not intend to use, I will notify the SAIN representative, and I will return anything unused in good condition as soon as possible.

If approved I agree to not add any other animals to the household while receiving feed and/or care from this SAIN program.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_