



# Financial Aid for Veterinary Emergencies

## Johnson County Humane Society

Our goal is to help individuals in immediate need provide emergency care for their own animal or one they have rescued. We may pay a dollar amount or a percentage of the bill (as a grant or a loan) at the veterinary clinic of our choice.

This financial aid will usually cover the cost of diagnostics and simple treatment. We rarely have enough money to cover complicated treatment plans.

Describe how this animal's life is in immediate danger. \_\_\_\_\_

How does the immediate problem present itself? \_\_\_\_\_

How is this animal behaving right now? \_\_\_\_\_

When was the last time the animal ate? \_\_\_\_\_

When was the last time the animal drank? \_\_\_\_\_

How much are you (the caregiver) able to help out financially or otherwise? (Every little bit counts.) \_\_\_\_\_

By what names (including nicknames) is this animal called? \_\_\_\_\_

Species: \_\_\_\_\_ Breed or mix: \_\_\_\_\_ Color/markings: \_\_\_\_\_

Age: \_\_\_\_\_ Size or weight: \_\_\_\_\_ Gender:  male  female Neutered? ( no  yes)

What medical conditions has this animal experienced? \_\_\_\_\_

Which drugs (and dosages) is this animal currently taking? \_\_\_\_\_

What has been this animal's most serious medical concern? \_\_\_\_\_

Has this animal been declawed?  no  yes—( front  back)

Are this animal's vaccinations up to date?  yes  no

Current brand of food: \_\_\_\_\_

Is this an indoor/outdoor animal?  yes  no

What else should be known about this animal? \_\_\_\_\_

Current veterinarian: \_\_\_\_\_ Clinic name: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

We are fortunate to have two 24-hour emergency vetmed clinics in our area. We may send you to one of them.

Eastern Iowa Veterinary Specialty Center—319-841-5161  
755 Capital Drive, SW  
Cedar Rapids, IA 52404

Emergency Veterinary Service of Iowa City—319-338-3605  
3030 Northgate Drive  
Iowa City, IA 52245

Your Name (legibly) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone: hm ( ) \_\_\_\_\_ wk ( ) \_\_\_\_\_

E-mail addy: \_\_\_\_\_

Date you completed this form: \_\_\_\_\_

**Johnson County Humane Society**

**Snailmail:** Box 2775, Iowa City, IA 52244

**WebSite:** [www.johnsoncountyhumane.org](http://www.johnsoncountyhumane.org)

**E-mail:** [jchs@johnsoncountyhumane.org](mailto:jchs@johnsoncountyhumane.org)

*Johnson County Humane Society—8/1/16/jva*