

Participating Veterinary Practices

ALL OF OUR VETS HAVE SOME ADDITIONAL CHARGES. PLEASE CHECK WITH THE PRACTICE FOR DETAILS.

BUCKEYSTOWN

Buckeystown Vet Center
3820 Buckeystown Pike
Buckeystown, MD 21717
(301) 698-9930

EMMITSBURG

Emmitsburg Vet. Hospital
9436-B Waynesboro Pike
Emmitsburg, MD 21727
(301) 447-6237

**Current clients only
Restrictions apply,
contact practice for details**

FREDERICK

All Creatures Animal Hospital
1275 W. Patrick Street
Frederick, MD 21702
(301) 620-9600

**Restrictions apply
contact practice for details.**

Frederick Vet Center
7421 Grove Road
Frederick, MD 21701
(301) 694-8015

**Restrictions apply,
contact practice for details**

McClellan Vet Clinic, P.A.
142A West Patrick Street
Frederick, MD 21701
(301) 663-6531

Old Farm Vet
100 Tuscanny Drive
Frederick, MD 21702
(301) 846-9988

**Restrictions apply,
contact practice for details**

Prospect Vet Clinic
411 S. Jefferson Street
Frederick, MD 21701
(301) 695-1050
(no dogs over 45 lbs.)

West Frederick Vet Hospital
6902 Bowers Road
Frederick, MD 21702
(301) 473-4478
**no female dogs over 50 lbs.
Restrictions apply
contact practice for details.**

Yellow Springs Vet Clinic
25 Thomas Johnson Drive
Frederick, MD 21702
(301) 663-8353

IJAMSVILLE

Green Valley Animal Hospital
2910 Price Distillery Road
Ijamsville, MD 21754
(301) 831-6930

Current clients only

JEFFERSON

Jefferson Vet Clinic
4014-J Mountville Road
Jefferson, MD 21755
301-834-8000

Cats Only

MIDDLETOWN

Middletown Vet Clinic
207-A South Church St.
Middletown, MD 21769
(301)371-6212

Current clients only

Valley Veterinary Hospital
4315 Old National Pike
Middletown, MD 21769
(301-371-7700)

Monrovia

Mullinex Vet Clinic
5209-B Green Valley Road
Monrovia, MD 21770
(301)865-4224

Current clients only

MOUNT AIRY

Mount Airy Animal Hospital
1308 South Main St.
Mt. Airy, MD 21771
(301) -829-4800

(No canine spays)

MYERSVILLE

Palmer Animal Hospital
9405 Baltimore National Pike
Myersville, MD 21773
(301) 371-3333

NEW MARKET

New Market Animal Hospital
10609 Old National Pike
New Market, MD 21774
(301) 865-3232

**Cats at least 4 lbs. and 4 mo.
No Dogs over 50LBS.**

THURMONT

Catoctin Vet Clinic
4 Paws Place
Thurmont, MD 21788
(301) 271-0156

**Current clients only,
Contact practice for details.**

URBANA

Greenbriar Vet Center
3051 Thurston Road
Urbana, MD 21704
(301) 874-8880

Urbana Veterinary Hospital
3569 Urbana Pike
Frederick, MD 21704
(301) 831-8646

Current clients only

WALKERSVILLE

Animal Care Clinic
Walkersville Village Center
Walkersville, MD 21793
(301) 898-7276

Walkersville Vet Clinic
10559 Glade Road
Walkersville, MD 21793
(301) 898-7676

**Current clients only, Contact
practice for details.**

We strongly urge you to contact the participating veterinary practice and tell them you are using a POP voucher from us. They are being reimbursed the amount you pay, plus additional monies from us. Ask them what their requirements are and what expenses are and are not covered by the FCHS POP voucher. Please check with the vet's office before making your appointment to make sure you can afford all additional cost!

What's the process? Application Instructions:

Read the entire four pages of this document.

Complete the application on page 4.

Return the following:

1. Your application, page 4 only.
2. The income documentation required (see application), and
3. Your payment in the form of:
 - Cash (only if paying in person, at our office),
 - Money Order, or
 - Credit Card.

No personal checks please.

to us at: Frederick County Humane Society
POP Program
P.O. Box 3185
Frederick, Maryland 21705-3185

Allow a minimum of one week between submitting this application and the date of surgery. To minimize processing time please make sure that your information is complete, accurate, and includes both the required proof of income and your payment. You may also drop off your paperwork at our office. Please call ahead to make sure someone is available.

Receive your voucher from us via mail or pick it up at our office. Keep it safe.

Take the voucher with you when you go to your vet appointment.

POP vouchers expire within 30 days of issuance. Please contact us if you need an extension on your POP voucher date. Refunds will be considered on a case by case basis.



Frederick County Humane Society, Inc.
 P.O. Box 3185
 Frederick, MD 21705-3185
 301-694-8300
 Fax 301-694-8305
 www.fchs.org

Pet Overpopulation Prevention (POP) Program Application

This program is For Low-Income Frederick County Residents **Only**. To qualify for the program, your total gross household income must fall within the Eligibility Guidelines listed on page 1.

Please follow the instructions on page 2 to complete the application. Thank you.

YOUR INFORMATION:

Name: _____ Home Phone: _____

Address: _____ Work Phone: _____

of people in your household: _____ Total household gross weekly income from all sources: \$ _____

Which of the following forms of Proof of Income will you be including with your application?

| | |
|---|---|
| <input type="checkbox"/> Most current income tax forms | <input type="checkbox"/> VA or Social Security Disability |
| <input type="checkbox"/> Current W-2 forms for your family | <input type="checkbox"/> WIC eligible |
| <input type="checkbox"/> Recent pay stubs | <input type="checkbox"/> MD Energy Assistance |
| <input type="checkbox"/> Section 8 eligible | <input type="checkbox"/> County Social Services Benefits |
| <input type="checkbox"/> Food stamps eligible | <input type="checkbox"/> Other: _____ |

PET INFORMATION:

Pet's Name: _____ Dog or Cat Male or Female

Weight (approx.): _____ Age: _____ Breed: _____

Has your pet ever seen a veterinarian? Yes or No. Date of last vet visit: _____

Has your pet had all of its recommended shots? Yes or No

Who is your pet's veterinarian? _____ Phone: _____

Will you be using this veterinarian for the spay/neuter surgery? Yes or No.

If not, which of our "Participating Veterinarians" listed on page 3 will you be using? _____

PAYMENT INFORMATION:

The fee for spay/neuter surgery is: Dog: Female and Male \$ Call for amount

Cat: Female \$ 30

Payment Method: Male \$ 30

| | |
|---|--|
| <input type="checkbox"/> Cash (only if paying in person, at our office) | <input type="checkbox"/> Visa |
| <input type="checkbox"/> Money Order (No personal checks accepted) | <input type="checkbox"/> Discover Card |
| <input type="checkbox"/> MasterCard | |

Name as it appears on Credit Card: _____

Credit Card Number _____ - _____ - _____ - _____ Exp. Date __ / __ (mm/yy)

I certify that I am a low income Frederick County resident, and am in need of assistance in paying for spay/neuter surgery for my pet. I have read all five pages of this application and I certify that all of the above information is true and complete to the best of my knowledge. I further authorize you to charge my credit card (if that is the payment method selected) the appropriate fee checked above.

Signed: _____

Date: _____