

# Application Form – Cat Desexing Voucher

## Part 1: Applicant Details

Applicant Name:

Phone Number:

Email Address:

Address:

## Part 2: Cat Details

Cat Name:

Breed:

Male:            Female:

Microchipped:    Yes    No

Microchip Number:

\*Please note: A separate application form is required if more than one voucher is required.

## Part 3: Additional Details

Pension/Centrelink Card Holder issued by Centrelink:    Yes    No

\*If yes, please provide a copy of the card.

Stay Cat:            Yes    No

\*Please note that if you are caring for a stray cat the cat must be microchipped in your name and you must be willing to provide all care for the cat's future health and wellbeing.

**Which Veterinary Clinic will you be attending:**

Leppington Veterinary Clinic  
Rossmore Veterinary Hospital  
Uni Vets Camden

**Please note that the lodgement of this application does not guarantee that a voucher will be provided.**

You can lodge your application by:

**EMAIL:** [mail@camden.nsw.gov.au](mailto:mail@camden.nsw.gov.au)

**MAIL:** Camden Council, PO Box 183, CAMDEN NSW 2570

**IN PERSON:** 70 Central Avenue, ORAN PARK

