



Hawaiian Humane Society

People for animals. Animals for people.

PET FOOD APPLICATION

(FOOD GIVEN BASED ON NEED AND AVAILABILITY)

COMMUNITY OUTREACH COORDINATOR: NATALIE LUKASHEVSKY, 356-2217 OR
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Contact Information

Name: _____ Date: _____

Phone : _____ Email: _____

General Information

What city/area do you live now? _____

Are you on government assistance? (i.e. WIC, EBT, Quest) _____

If yes, what: _____

Are you currently unemployed? _____ Are you homeless? _____

How did you find out about our program? _____

Pet (s) Information

How many pet (s) do you own? _____ Species: Dog _____ Cat _____ Other _____

Are your pet (s) spayed or neutered? _____

Signature: _____

(By signing above, I certify that all the information is accurate)