

The Mitzvah Fund
PO Box 56 East Montpelier, VT 05651
802-461-3277/ Fax 802-229-1911
themitzvahfund1818@gmail.com
themitzvahfundvt.org

Veterinarian Referral Form

Thank you for thinking of the Mitzvah Fund for your patient in need. Currently the Mitzvah Fund provides care to the animals of: ONLY Low Income Seniors, Veterans, & Homeless. If your client does not qualify in any of these fiscal categories please contact us directly to discuss the case. We will see if we can fit them into our schedule. They will get an estimate (usually much less than a fulltime practice with large overhead) and we may be able to fit them in between our qualifying applicants. We **do not pay** other hospitals to provide care. We just do not have the administrative staff or fiscal capabilities to offer payment plans for clients.

Please download our application [here](#). You can also direct your client directly to our website themitzvahfundvt.org.

Veterinarian & Hospital Referring: _____

Client Name: _____

Pet Name: _____ Age: _____ Spayed/Neutered (Y/N) Sex ___ Weight: _____

Client Phone Number: _____

Client Email Address: _____

Client Mailing Address: _____

Brief description of surgical/dental needs:

PLEASE ATTACH COMPLETE MEDICAL RECORD WITH LABS & XRAYS

*All our geriatric referrals will have a CBC/SC/T4/UA +/- Chest films before anesthesia if they have a murmur. You do not need to do these before referring.