



Geld Voucher Program

The Kentucky Horse Council (KHC) is a nonprofit organization dedicated, through education and leadership, to the protection, growth and development of the equine industry in Kentucky. The KHC Geld Voucher Program was established to ensure that all equines have access to castration surgeries, regardless of their caretakers' financial situation.

The KHC requires that individuals provide the information requested on the attached form regarding income, family size and horse information so that the organization might provide financial assistance in a fair and consistent manner. All information will be kept confidential. Applications can be postal mailed or emailed to the addresses below.

To process your application, we need one of the following:

- Copy of last year's tax return
- Copy of last two pay stubs (or copy of bank statements showing amount of monthly deposit)
- Copy of social security or disability checks (or copy of bank statements showing amount of monthly deposit)
- Documentation of any public assistance received, such as SNAP benefits, rent subsidy, disability, etc.
- Student ID (if applicable)

(If you do not have a copy of your tax return, one can be obtained by calling the Internal Revenue Service. If you did not file taxes last year, or if you don't have any of the documents required, please write a letter or e-mail explaining your personal situation.)

Please allow up to two (2) weeks to process the application. Assistance will be determined based on a thorough review of the application by the KHC Health and Welfare committee. Applicant will be notified by telephone or e-mail if his/her application has been approved or if s/he need to submit additional information. Financial assistance is subject to available resources.

Requirements:

- ✓ Geld vouchers are offered to **LOW INCOME** individuals and families only. Commercial operations and breeding farms are excluded from this offering
- ✓ It is the owner's responsibility to schedule the castration appointment with their local veterinarian
- ✓ Voucher shall not exceed \$150 per animal, not to exceed two horses or \$300 total
- ✓ Geld vouchers will be paid directly to the veterinarian after services have been rendered
- ✓ Attending veterinarian must complete a geld statement and submit this with an invoice for payment
- ✓ All male equines on the property must be gelded or slated to be gelded

Confidentiality

Financial documents submitted to the KHC will be used to determine program eligibility and will be reviewed by KHC staff and Health and Welfare committee members. Financial documents will be held confidential and will not be shared with any non-KHC employee or disclosed to any other person except in response to valid subpoena issued by a court or agency of competent jurisdiction.

Complete application and return to:
Kentucky Horse Council
4037 Iron Works Parkway, STE. 120
Lexington, KY 40511

phone 859-367-0509
info@kentuckyhorse.org

Kentucky Horse Council – Geld Voucher Program Application

Applicant's Name _____ Email _____
 Home Address _____ Home Phone _____
 City _____ State _____ Zip _____
 Place of Employment _____ Work Phone _____

Additional Adult in Household (if applicable) _____
 Email _____
 Place of Employment _____ Work Phone _____

Dependents Living in Household

Number of Dependents _____ Ages _____

Annual Household Income Before Taxes Taken Out

	Head of Household	Additional Adult in Household
Employment	_____	_____
Child Support	_____	_____
Government Assistance	_____	_____
SNAP Benefits	_____	_____
Student Loan	_____	_____
Other	_____	_____
Total	_____	_____

PROOF OF INCOME
 Submit application with **ONE** of the following:

- Copy of last year's tax return (or)
- Copy of last two pay stubs (or)
- Copy of social security or disability checks

- Describe any unusual expenses you must meet: _____
- Number, breed and sex of all owned horse(s)/equine(s): _____
- Please list all male equines to be castrated through this program:

Name	Breed	Age
1		
2		
3		
4		

Name	Breed	Age
5		
6		
7		
8		

Veterinarian Name: _____
 Address: _____

Phone: _____
 City: _____

I certify that the above information is true and complete to the best of my knowledge and that I own or have full authority to geld the animal(s). I agree to the requirements as set forth in this document.
 I understand that false or incomplete information could jeopardize my financial assistance. I understand that the veterinarian is performing services for me, not the Kentucky Horse Council, and that the Kentucky Horse Council is not obligated to provide financial assistance even after it is approved by the Kentucky Horse Council. I agree to indemnify, defend, and hold the Kentucky Horse Council harmless and free of liability for any claim arising out of my participation in the KHC Geld Voucher Program. I attest that all my male equines are or will be castrated once services through this program are finalized.

Signature _____

Date _____

REV. 7/2022

For Office Use Only

Application Received on _____ by _____.	Reviewed on _____ by _____.
Awarded/Declined on _____ by _____.	