



Return this form, along with veterinary receipt, to:

Hedgehog Welfare Society

P.O. Box 340967

Milwaukee WI 53234

HWS Veterinary Funding Request

All requests for vet funding must be made within 6 months of the date of rescue, must be accompanied by copies of the vet bills, and must be accompanied by proof of payment (i.e., credit card receipt). PLEASE NOTE THAT THE HWS CAN ONLY REIMBURSE CHARGES FOR HEDGEHOGS THAT WERE ADOPTED THROUGH OUR ORGANIZATION.

Date of Request:

Your Name:

Are you an HWS member : YES or NO

Contact Information (phone, address, e-mail):

Name of rescued hedgehog:

Date of hedgehog rescue, and who you rescued the hedgehog from:

Situation from which the hedgehog was rescued:

Date of medical treatment:

Medical treatment required:

Name and contact information of treating veterinary clinic: