



**K&L Animal Rescue, Inc.
Grant Application**

2025-2026

www.klrescue.org

K&L Animal Rescue, Inc. Grant Application

K&L Animal Rescue is committed to ensuring that pets receive the medical care they need, regardless of their owner's financial situation or a rescue organization's available resources. This application is for pet owners, foster caregivers, and animal rescues seeking financial assistance for a pet in need of urgent medical care.

We offer two grant programs:

- **Legend's Hero Pet Fund** – Designed to support the pets of military personnel and first responders, ensuring they receive the best possible care while their owners focus on their critical duties.
- **King's Health & Hope Grant** – Provides financial assistance for companion animals in need of urgent medical care, helping pet owners and rescues alleviate the burden of veterinary expenses.

This application must be completed by the pet owner, an approved foster caregiver, or an authorized representative of a 501(c)(3) animal rescue or shelter.

Learn more about our different funding options at www.klrescue.org

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Application Instructions

Eligibility: This application is open to:

- Pet owners experiencing financial hardship
- Foster caregivers currently caring for a pet in need of medical assistance
- Animal rescues and shelters seeking funding for a pet's veterinary care

Required Information:

- Applicant's contact details
- Treatment plan and estimated costs
- Financial need statement (for pet owners, fosters, and rescues)
- Rescue organization details (if applicable)

Documentation: The following supporting documents must be submitted with the application:

- Veterinary estimate or invoice for treatment
- Statement of financial hardship (for pet owners and rescues)
- Proof of nonprofit status (for rescues)

Funding and Approval: Submitting this application does not guarantee funding. If approved, funds will be paid directly to the veterinary clinic or service provider.

Submission Instructions

Email the completed application and all required documents to:

support@klrescue.org

Subject Line: Grant Application – [Pet's Name]

Incomplete applications or missing documentation may result in delays or denial of funding. If you have any questions, please contact support@klrescue.org.

Thank you for your dedication to animal welfare. We are honored to assist pets in need.

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Applicant Information

Full Name: _____

Phone Number: _____

Email Address: _____

Mailing Address: _____

City, State, Zip Code: _____

Are you applying as:

Pet Owner

Foster Caregiver

Animal Rescue Representative (501(c)(3) required)

If applying as a rescue, organization name: _____

Rescue's EIN (if applicable): _____

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Pet Information

Pet's Name: _____

Species (Dog, Cat, etc.): _____

Breed: _____

Age: _____

Weight: _____

Spayed/Neutered? Yes No

Current Vaccination Status: Up-to-Date Not Up-to-Date

Previous Medical Conditions: _____

Current Medical Issue Requiring Assistance:

Estimated Cost of Treatment: \$ _____

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Veterinary Provider Information

Clinic/Hospital Name: _____

Veterinarian's or Provider's Name: _____

Clinic Address: _____

City, State, Zip Code: _____

Phone Number: _____

Email Address: _____

Tax ID / EIN (if applicable): _____

Is this clinic willing to accept partial funding? Yes No

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Treatment Plan

Diagnosis: _____

Recommended Treatment: _____

Estimated Timeline for Treatment: _____

Prognosis if Treatment is Given: _____

Prognosis if Treatment is Not Given: _____

Has the applicant exhausted other financial assistance options? Yes No

If yes, please list sources attempted:

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Grant Information

Which grant are you applying for?

Legend's Hero Pet Fund

King's Health & Hope Grant

Total Amount Requested: \$ _____

Can partial funding assist the pet? Yes No

If yes, how much is still needed? \$ _____

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Financial Hardship Statement

Please provide a brief explanation of the financial hardship preventing the pet owner, foster, or rescue from covering the cost of treatment:

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Certification & Agreement

By checking this box, I certify that the information provided in this application is true and accurate to the best of my knowledge. I acknowledge that K&L Animal Rescue may verify any information submitted and that submission of this application does not guarantee funding. I confirm that I have obtained permission from the pet owner (if applicable) to apply on their behalf. If approved, I understand that funds will be paid directly to the veterinary clinic or service provider.

Applicant's Signature: _____