



VOORHEES ANIMAL ORPHANAGE TRANSFER PARTNER APPLICATION & AGREEMENT

CONTACT INFORMATION

Organization Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Physical Address (if different): _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____ Website: _____

Group President or Director: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

AUTHORIZED AGENTS

This transfer partner authorizes the following persons to enter into a transfer agreement and to remove animals from VAO's shelter facility on behalf of the organization.

AGENT 1: _____ Position: _____

Phone: _____ Email: _____

AGENT 2: _____ Position: _____

Phone: _____ Email: _____

AGENT 3: _____ Position: _____

Phone: _____ Email: _____

AGENT 4: _____ Position: _____

Phone: _____ Email: _____

REFERENCES

VAO requires transfer partners to submit two references from shelters or other rescue groups from which the organization acquires animals. Please provide complete contact information for the references listed below. In addition, we ask that you provide us with the name and contact information of your local animal control provider and veterinarian.

REFERENCE 1: _____

Primary Contact: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Relationship with rescue: _____

REFERENCE 2: _____

Primary Contact: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Relationship with rescue: _____

LOCAL ANIMAL CONTROL PROVIDER:

Primary Contact: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

VETERINARIAN OF RECORD: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

OPERATING DETAILS

YEAR ESTABLISHED: _____

NUMBER OF ANIMALS HANDLED ANNUALLY: _____

ANNUAL BUDGET: _____

FACILITY: Does your rescue have a building or facility? Is it a network of foster homes? Does it use a boarding facility? If so, which one? VAO Transfer Partners with a shelter building or primary facility, or Transfer Partners that rely on a boarding facility, must be available for a site inspection by VAO staff or authorized agents.

501(c)(3) STATUS: VAO Transfer Partners should be tax-exempt not-for-profit organizations with 501(c)(3) status. If your organization is accepting donations from the public, your organization must be 501(c)(3) or in the process of obtaining 501(c)(3) status (please list EIN below).

FOR-PROFIT TRANSFER PARTNERS: For-profit Transfer Partners must have a physical facility (store, office), have been in business for at least 3 years before applying for partnership, and operate with a specific animal-related purpose in support of a charitable mission targeted at adoption and lifesaving. For-profit partners may not represent themselves as nonprofits. Please provide the address of your physical facility:

WHAT IS YOUR ORGANIZATION'S SPAY/NEUTER POLICY: VAO Transfer Partners must provide pre-adoption sterilization of all animals. Exceptions based on a veterinarian's recommendation are appropriate and acceptable. In the event that this occurs, please notify VAO staff.

SUPPORTING DOCUMENTS

Please submit the following documents for review:

Adoption Application & Contract 501(c)(3) Document Articles of Incorporation Kennel License (if applicable)

TRANSFER AGREEMENT

Upon entering into a Transfer Partnership with VAO, I understand and agree to the following:

- I agree to pick-up, or arrange pick-up, for any animal I have committed to transfer to my organization within 24 hours of the animal becoming available for transfer, unless otherwise arranged with the staff at VAO
- I understand that VAO makes no express or implied warranties as to the health or soundness of transferred animals, and acknowledge that I am taking any animals "as-is."
- I understand that there are no guarantees as to the behavior or disposition of the animals transferred to me.
- I agree to pursue veterinary treatment to assess all animals transferred to me, and to provide basic and remedial veterinary care as needed.
- I agree to provide the animals transferred to me with nutritionally adequate food, clean water, and exercise sufficient to maintain the health and well-being of the animal.
- I agree to address any medical or behavioral problems that the animals transferred to me may have.
- I agree to surgically sterilize all animals transferred to me prior to adoption (if applicable).
- I agree to carefully screen adoption applications to determine their suitability for the animals transferred to me, and to stringently evaluate potential foster homes.
- I agree to notify VAO if I decide to make a euthanasia decision for any animal transferred to me.
- I agree that in the event I need to return an animal to VAO I will provide at least 24 hours notice.
- I agree, upon reasonable notice, to permit VAO to inspect my facilities during normal business hours.
- I agree to pay for any expenses incurred relating to the veterinary care or basic husbandry needs of the animals transferred to me, unless otherwise agreed to in writing by VAO, and waive any rights to reimbursement of said costs and expenses from VAO.
- I agree to comply with any applicable federal, state, or local laws applicable to the animals transferred to me.
- I agree to waive and forfeit any and all claims I, my organization, or agents of my organization has or may have in the future against VAO.

Name (please print): _____

Signature: _____ Title: _____ Date: _____

THANK YOU

Thank you for your interest in helping VAO save the lives of Camden County's homeless, orphaned, and abandoned animals. You will be contacted shortly by a VAO staff member about the status of your application.