



Animal Rescue Pet Placement Application

Upon Completion, please mail to: Aggieland Humane Society
Attn: Operation Supervisor
PO Box 392
Bryan, TX 77806
5359 Leonard Road

Or submit in person to:
Bryan, TX 77807

Name of Agency: _____

Mailing Address: _____

Street Address: _____

Phone: () - Fax Number: () -

Email Address: _____

Agency Representative(s) authorized to receive transferred animals:

1) Name: _____

Address: _____

Phone: _____

Email: _____

2) Name: _____

Address: _____

Phone: _____

Email: _____

Please provide the following information about your organization:

What primary breed(s) of animal(s) does your organization rescue?

What is the "Mission" of your organization? _____

Approximately how many foster homes do you utilize? _____

Please provide a breakdown of the fees your organization charges (i.e. fee amount and service provided.) _____

Please explain what your organization does with an animal once it is received from the Aggieland Humane Society.

Approximately how long is an animal held before the adoption process begins? _____

How does your organization limit the intake and dispersal of animals to foster homes?

List all reasons why an animal might be euthanized by your organization:

We require a reference from each of the following:

- 1) A Veterinarian**
- 2) Animal Shelter/Humane Society with whom the agency has a working relationship with**
- 3) At least one Rescue Organization with whom the agency has a working relationship with**

Veterinarian

Name: _____ Clinic: _____

Clinic's Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number(s): _____

Animal Shelter / Humane Society

Agency: _____

Contact Person(s): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number(s): _____

Rescue Organization

Agency: _____

Contact Person(s): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number(s): _____

Please explain how you believe our organizations would be beneficial to each other:
