



Pet Guardianship Program

At the Humane Society of Charlotte (HSC), we know that pets are part of the family and therefore you may want to provide for them by including them in your will or trust, just as you would appoint a guardian for a child. Sometimes it's just not possible to make arrangements for pets with family members or friends which is why you may designate that your animals be entrusted to the care of the Humane Society of Charlotte through your will or trust. By making such arrangements, the Humane Society of Charlotte would be honored to include you as a member of our Legacy Society.

Program Overview

The goal of the pet guardianship program is to take your pet(s) (dogs and cats only) into the care and protection of the Humane Society of Charlotte at the time of your passing with the ultimate goal of re-homing your pet. Your pet would receive a full medical and behavioral evaluation upon intake to determine the best outcome for their individual needs. We offer you our promise that we will do our very best to care for your pet(s) and to provide them a positive outcome to live out their lives in the most enriching way possible. If multiple pets are surrendered and are bonded, we will do our best to rehome them together but that cannot be guaranteed. The Humane Society of Charlotte does not believe in euthanizing any animal that is healthy or has a treatable condition. After evaluation by the HSC behavior and medical team, if it is evident that your pet is suffering, has a poor quality of life or is a danger to the public, euthanasia may be considered.

How to Enroll

1. Have an estate planning attorney draw up a will or trust for you that names the Humane Society of Charlotte as the guardian and caregiver for your pet(s).
2. Complete the Pet Biography Form for each of your animals. This information will enable us to ensure they continue to receive the best care possible and that this care be continued in their new adoptive homes.
3. Name the Humane Society of Charlotte as a beneficiary of your will or trust, life insurance policy or retirement account and provide a copy of the pertinent pages to the Philanthropy Team at HSC. We kindly request a suggested minimum donation amount of \$5,000 per animal that will be placed under our care. As we will not know what your pet may need, this donation will greatly assist us with all costs associated with their evaluations, treatments, care and re-homing as HSC relies solely on donations in order to effectively deliver our services for the community.
4. Keep a copy of the Pet Biography Form with your will or trust and inform the executor of your estate or trustee of your intentions.

Humane Society of Charlotte
Tax ID # 58-1342479
2700 Toomey Avenue, Charlotte, NC 28203
Call 704-494-7704 or Email plannedgiving@humanecharlotte.org



Pet Biography Form

Please complete a separate form for each pet

Owner Information

Name _____

Address _____ City _____ ST _____ Zip _____

Email _____

Phone _____

How many adults in the household _____ How many children in the household _____

Pet Information

Species dog cat

Pet's Name/Nicknames _____

Approximate Date of Birth _____

Gender male female Breed _____

Spayed/Neutered yes no

Date you acquired the pet _____

Pet's preferences if applicable adults children men women dogs cats

Overall description of pet (select all that apply)

Aggressive	<input type="checkbox"/>	Happy	<input type="checkbox"/>	High Energy	<input type="checkbox"/>
Calm	<input type="checkbox"/>	Independent	<input type="checkbox"/>	Low Energy	<input type="checkbox"/>
Cuddly	<input type="checkbox"/>	Nervous	<input type="checkbox"/>	Medium Energy	<input type="checkbox"/>
Curious	<input type="checkbox"/>	Outgoing	<input type="checkbox"/>	Likes to Play	<input type="checkbox"/>
Dependent	<input type="checkbox"/>	Playful	<input type="checkbox"/>	Likes to Be Pet	<input type="checkbox"/>
Destructive	<input type="checkbox"/>	Shy	<input type="checkbox"/>	Protective	<input type="checkbox"/>
Excited	<input type="checkbox"/>	Smart	<input type="checkbox"/>	Vocal	<input type="checkbox"/>
Fearful	<input type="checkbox"/>	Stand-Offish	<input type="checkbox"/>	Indifferent	<input type="checkbox"/>
Friendly	<input type="checkbox"/>	Stubborn	<input type="checkbox"/>	Separation Anxiety	<input type="checkbox"/>



Pet Biographical Information Continued

Vet Practice Name _____

Preferred Doctor _____

Vet Address _____ **City** _____ **ST** _____ **Zip** _____

Vet Phone Number _____

Medications _____

Feeding Instructions (brand, quantity, schedule) _____

Potty Instructions (how often, any special instructions) _____

Exercise Schedule _____

Anything Else We Should Know about Your Pet (car travel, words they know, etc.) _____

Describe an Ideal Home _____