



# California Animal Welfare Association

Promoting Excellence in Animal Care, Sheltering, and Law Enforcement since 1909™

Open to organizations that are incorporated as a society for the prevention of cruelty to animals and governmental animal care and control agencies (including police departments with animal control responsibilities). Organization members are approved for membership after review of their application.

## ORGANIZATION MEMBERSHIP APPLICATION

Date: \_\_\_\_\_

### GENERAL INFORMATION

Name of Organization \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Website \_\_\_\_\_

Main Phone \_\_\_\_\_ Service Areas \_\_\_\_\_

Primary Contact's Name (CEO, Director) \_\_\_\_\_

Job Title \_\_\_\_\_

Phone \_\_\_\_\_ Ext. \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Primary's Email \_\_\_\_\_

Mailing Address (if different from above) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Secondary Contact's Name \_\_\_\_\_

Job Title \_\_\_\_\_

Phone \_\_\_\_\_ Ext. \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Secondary's Email \_\_\_\_\_

Disaster Lead Name \_\_\_\_\_ Job Title \_\_\_\_\_

Disaster Lead's Email \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Staff: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Volunteers \_\_\_\_\_

### Applying as GOVERNMENT ANIMAL CONTROL AGENCY

### Applying as a NON-PROFIT ANIMAL WELFARE ORGANIZATION

**For Non – Profits:** The organization is incorporated as a Humane Society/SPCA under:

Section 10400 of the California Corporations Code       the General Nonprofit Corporations Law

Date Incorporated \_\_\_\_\_ Annual budget \$ \_\_\_\_\_

### SHELTER (if applicable)

### Our shelter(s) can accommodate:

Number of Shelter Facilities \_\_\_\_\_

Under usual circumstances: dogs \_\_\_\_\_ cats \_\_\_\_\_ large animals \_\_\_\_\_

In an emergency: dogs \_\_\_\_\_ cats \_\_\_\_\_ large animals \_\_\_\_\_

**For all AGENCIES - SERVICES**

**Does your organization:**

- |   |                          |                          |
|---|--------------------------|--------------------------|
|   | YES                      | NO                       |
| Operate an animal shelter? . . . . .            | <input type="checkbox"/> | <input type="checkbox"/> |
| If no, are you planning to build one? . . . . . | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, when? _____                             |                          |                          |
| Operate a physical adoption center?. . . . .    | <input type="checkbox"/> | <input type="checkbox"/> |
| Operate a spay/neuter clinic? . . . . .         | <input type="checkbox"/> | <input type="checkbox"/> |
| Provide spay/neuter vouchers? . . . . .         | <input type="checkbox"/> |                          |
| Operate a veterinary hospital? . . . . .        | <input type="checkbox"/> |                          |
| Maintain a wildlife department? . . . . .       |                          |                          |

- |   |                          |                          |
|---|--------------------------|--------------------------|
|   | YES                      | NO                       |
| Investigate complaints of cruelty/neglect to animals? . . . . . | <input type="checkbox"/> | <input type="checkbox"/> |
| Prosecute cruelty/neglect to animals? . . . . .                 | <input type="checkbox"/> | <input type="checkbox"/> |
| Conduct educational outreach? . . . . .                         | <input type="checkbox"/> | <input type="checkbox"/> |
| Offer adoption services? . . . . .                              |                          | <input type="checkbox"/> |
| Accept owner-surrendered pets? . . . . .                        | <input type="checkbox"/> | <input type="checkbox"/> |
| Operate other services not listed above? . . . . .              |                          |                          |

If yes, please describe:

**Our organization contracts to provide:**

- Animal control field services – List cities or counties \_\_\_\_\_
- Shelter housing services – List cities or counties \_\_\_\_\_

**Spay Neuter**

Do you offer spay/neuter services to the public? Yes  No

How many animals were spayed/neutered during the previous calendar year? Public pets \_\_\_\_\_ Shelter pets \_\_\_\_\_

**Intakes**

During the last year, how many animals did your organization take in? Dogs \_\_\_\_\_ Cats \_\_\_\_\_ Livestock \_\_\_\_\_

**Outcomes**

During the last year, how many animals were: Returned to Owner \_\_\_\_\_ Adopted/Transferred \_\_\_\_\_  
 Euthanized \_\_\_\_\_ Owner Requested Euthanasia \_\_\_\_\_

**Data**

\*Is your organization an active participant in Shelter Animals Count? Yes  No

**Staffing Resources**

Number of Animal Control Officers:		Number of Veterinarians on staff:
Number of Humane Officers: Level 1	Level 2	Number of RVTs on staff:
Number of Animal Care Staff		Comments:
Number of Customer Care Staff		

**APPLICANT SIGNATURE**

The undersigned certifies that the information in this questionnaire is, to the best of his or her knowledge, a true statement of the program and facility(ies) of the organization applying for membership in the California Animal Welfare Association.

Name _____	Title _____
Signature _____	Date _____

## APPLICATION PROCESS

Thank you for your interest in becoming a member of the California Animal Welfare Association. Upon receipt of your completed application and the requested materials, we will review your application and after the review, we will contact you regarding the status of your application. If your organization is incorporated as a society for the prevention of cruelty to animals, please also provide a copy of your 501(c) (3) IRS determination letter. (non-profits only)

Scan the application and other documents, then email to: [Info@calanimals.org](mailto:Info@calanimals.org)

Or, mail all materials to:

California Animal Welfare Association  
PO Box 249  
Penn Valley, CA 95946

## DUES SCHEDULE

**Please do not send payment of dues at this time.** After your application has been reviewed and accepted, we will send you an invoice for the annual dues. Membership terms are based on the calendar year, not on the date of application. Dues are based on membership type. Please read the next section to determine your membership type and dues.

## MEMBERSHIP LEVELS

### **Organization Membership**

Open to organizations that are incorporated as a society for the prevention of cruelty to animals and governmental animal care and control agencies (including police departments with animal control responsibilities).

Dues for Organization members are:

<u>NUMBER OF FULL-TIME EMPLOYEES</u>	<u>ANNUAL DUES</u>
0 – 5	\$100
6 – 20	\$250
21-50	\$350
51 or more	\$400
National Organization	\$600

### **Affiliate Membership**

Those agencies and organizations not eligible for Organization membership, such as nonprofit animal interests groups may apply for Affiliate membership. Affiliate members receive the same benefits of membership as Organization members.

Dues for Affiliate members are \$150. If you are applying for Affiliate Membership, *there is a different application*. Contact us and we will gladly send it to you.

Memberships run on a calendar year and are not pro-rated.