THOUSANDS OF PETS ARE ORPHANED EACH YEAR DUE TO THE DEATH OR DISABILITY OF THEIR HUMAN COMPANIONS. 2ND CHANCE 4 PETS FOCUSES ITS ENTIRE EFFORTS ON ADDRESSING THIS LONG UNRECOGNIZED ISSUE.

TABLE OF CONTENTS

Why Care Instructions are Important..........................1
Identifying Caregivers .............................................2
Care Instruction Forms to Complete.............................3–6
About 2nd Chance 4 Pets.................................7
Emergency ID Cards.............................................8

CONTACT US!
2nd Chance 4 Pets
1484 Pollard Road, No. 444
Los Gatos, CA 95032
email: info@2ndchance4pets.org
web: www.2ndchance4pets.org
501(c)(3) number 13-4280812

© 2013 2ND CHANCE 4 PETS

IF ANYTHING HAPPENED TO YOU, what would happen to me?

In this special edition newsletter created by the volunteers of 2nd Chance 4 Pets, we provide a way for you to document the instructions outlining the care of your pets to help secure lifetime care for them. Taking the time to complete these forms and provide copies to potential caregivers will help to guarantee that your pets will always receive care.

Completing Instructions For The Care Of Your Pets

On pages 3-6 of this newsletter we have included “care instruction forms” that you can complete, make copies of and pass along to anyone involved in caring for your pets. These forms can also be helpful with your estate planning activities.

Why are care instructions for your pets important?
To ensure that your pets will continue to receive the same type of care you currently provide, recording these instructions will allow anyone who might care for your pets (temporarily or permanently) understand best how to provide this care.

What if you have more than one pet?
Make copies of pages 5-6 and complete these two pages for each pet.

Are the forms available online?
Yes! Go to the front page of our website (www.2ndchance4pets.org) and look for the "PET CARE WORKBOOK".

2nd Chance 4 Pets is not a law firm and does not provide legal advice. Nothing contained in our literature should be construed as legal advice or the practice of law. The forms we provide are not a substitution for legal forms.
Locating a new home for your pets can take several weeks or several months, so it is important to arrange for temporary care as part of your planning efforts.

THANK YOU FOR RECOGNIZING THE WORK WE DO TO HELP ANIMALS!

Including 2nd Chance 4 Pets in your will is one of the most commonly known ways in which to make a lasting gift to charity—and one of the simplest. After ensuring that your family is taken care of, you can name 2nd Chance 4 Pets in your will so that our organization receives a gift from your estate.

HOW DO I LEAVE A GIFT TO 2ND CHANCE 4 PETS?

You should first decide what type of legacy you wish to leave to 2nd Chance 4 Pets. Let your attorney know what you want to do. He or she will need to know that the following words are typically used in wills to describe 2nd Chance 4 Pets:

“2nd Chance 4 Pets, a 501(c)3 nonprofit corporation organized under the laws of California and having its principal mailing location at 1484 Pollard Rd, No 444, Los Gatos, CA 95032.”

CAN I LEAVE MY PETS TO THE CARE OF 2ND CHANCE 4 PETS?

Our organization cannot be responsible for the care of your pets. However, we can provide you and your attorney with information to help you determine the most appropriate means to ensure that your pets will be cared for should they outlive you.

Thank you for recognizing our important efforts. Together, we will help save pets’ lives, bring peace of mind to pet owners, and reduce the burden on animal shelters and rescue groups.

SELECTING CAREGIVERS

As part of the process of documenting instructions for the care of your pets, identifying the right individuals to provide care is the most important part of lifetime care planning for your pets.

You should first take into account whether you want all your pets to be cared for by one person, or if different pets should be cared for by different people. It might be best to keep pets together who have bonded. (If you have many pets and own your own home, review the article on our website about the “Animal Care Panel” option.)

When selecting caregivers, consider partners, adult children, parents, brothers, sisters, and friends who have met your pets and have successfully cared for pets themselves. Other options include pet sitters, dog walkers, other pet owners and staff members at your veterinarian’s office (vet techs can make excellent caregivers!).

Identify alternate caregivers in case your first choice becomes unable or unwilling to take over the care of your pets. It’s essential that you discuss your expectations with all potential caregivers so they understand and are willing to accept the responsibility of caring for your pets. Remember that a caregiver will have full accountability for your pets’ care—including veterinary treatment and euthanasia. We recommend that you carefully identify the individuals you trust, who accept the responsibility of caring for your pets and will do what is in their best interest.

Stay in touch with designated caregivers and alternates. Over time, people’s circumstances and priorities change. You will want to make sure that the arrangements you have made are kept up-to-date.

Locating a new home for your pets can take several weeks or several months, so it is important to arrange for temporary care as part of your planning efforts.

ENSURING LONG-TERM, PERMANENT CARE FOR YOUR PETS

The best way to make sure your wishes are fulfilled is by making formal arrangements that specifically cover the care of your pets. It’s not enough that long ago a friend or relative verbally promised to take over the care of your pets or even that you’ve decided to leave money to a friend for that purpose. We strongly recommend that you consult with an attorney to draw up a will, trust, or other legal documents, as well as allocate funds to provide for the care of your pets. For more information, please visit www.2ndchance4pets.org.
PET OWNER INFORMATION:
Name(s) ___________________________ Email ___________________________
Address __________________________________ City __________ State _____ Zip ______
Home Phone ( ) ____________________ Cell Phone ( ) ____________________ Work Phone ( ) ____________________

CAREGIVER INFORMATION
Carefully select a minimum of two caregivers who agree to be responsible for your pets should anything happen to you. Caregivers are typically responsible for the day-to-day care of your pets. They should fully understand the obligation and requirements for this role. Your choice of caregivers should take into consideration the potential lifespan of your pets.

Primary Caregiver
This caregiver has agreed to care for my pets should anything happen to me □ Yes □ No
This caregiver will provide □ short-term care □ long-term care □ both
Address __________________________________ City __________ State _____ Zip ______
Phone ( ) ___________________________ Cell Phone ( ) ____________________ Email ___________________________

Alternate Caregiver
This caregiver has agreed to care for my pets should anything happen to me □ Yes □ No
This caregiver will provide □ short-term care □ long-term care □ both
Address __________________________________ City __________ State _____ Zip ______
Phone ( ) ___________________________ Cell Phone ( ) ____________________ Email ___________________________

Pet Sitters and Boarding Facilities
Should your designated caregiver go on vacation or be temporarily unavailable to care for your pets, who should take care of them?
Contact ___________________________ Average daily charge (or costs) $ __________
Address __________________________________ City __________ State _____ Zip ______
Phone ( ) ___________________________ Cell Phone ( ) ____________________ Email ___________________________

Alternate Pet Sitters and Boarding Facilities
Contact ___________________________ Average daily charge (or costs) $ __________
Address __________________________________ City __________ State _____ Zip ______
Phone ( ) ___________________________ Cell Phone ( ) ____________________ Email ___________________________

EMERGENCY CONTACT INFORMATION
Emergency contacts might include friends and family members who may not necessarily take care of your pets but would be able to assist in case of an emergency.

Contact #1
Address __________________________________ City __________ State _____ Zip ______
Phone ( ) ___________________________ Cell Phone ( ) ____________________ Email ___________________________

Contact #2
Address __________________________________ City __________ State _____ Zip ______
Phone ( ) ___________________________ Cell Phone ( ) ____________________ Email ___________________________
VETERINARIAN INFORMATION
In addition to listing the contact details below, please provide your veterinarian with copies of your care instructions. Make sure your veterinarian clinic knows who they should contact in case of an emergency.

Primary Veterinarian or Emergency Care Facility

Name of Veterinarian __________________________________________ Email _____________________________

Address __________________________________________ City __________ State ______ Zip __________

Phone ( ) ___________________ Cell Phone ( ) _______________ Emergency Phone ( ) _______________

Alternative Veterinarian or Emergency Care Facility

Name of Veterinarian __________________________________________ Email _____________________________

Address __________________________________________ City __________ State ______ Zip __________

Phone ( ) ___________________ Cell Phone ( ) _______________ Emergency Phone ( ) _______________

TRUSTEE INFORMATION
Trustees are responsible for administering the assets you have set aside in your fund for your pets. Trustees might provide annual payments to caregivers as outlined in your estate plan or trust to cover the expenses of caring for your pet. It is recommended by licensed attorneys that Trustees and caregivers not be the same individuals.

Primary Trustee or Trustee Service

Address __________________________________________ City __________ State ______ Zip __________

Phone ( ) ___________________ Cell Phone ( ) _______________ Email _____________________________

Alternate Trustee or Trustee Service

Address __________________________________________ City __________ State ______ Zip __________

Phone ( ) ___________________ Cell Phone ( ) _______________ Email _____________________________

I would like to allocate $__________ per year for my Trustee or Trustee service to provide to the caregiver.

Trust Fund Information
For the benefit of the Trustee, please indicate how you plan to provide funds for the care of your pets:

☐ Bank account  ☐ Tied to will  ☐ Life insurance policy designates trust as beneficiary

☐ Other, please explain _____________________________________________________________

We encourage you to work with an attorney or financial planner to appropriately fund your trust so that the Trustee is able to access the funds.

Remaining Funds
Should my pet(s) die while under the care of a caregiver, I would like my remaining funds distributed to (percentages should total 100%).

2nd Chance 4 Pets ____________ %  Address: 1484 Pollard Road, No. 444, Los Gatos, CA 95032

Other pet welfare organization ____________ %  Address: _____________________________________________________________

Other beneficiary ________________________________________________________________
PET INFORMATION (Please make a copy of pages 5-6 to complete for each pet. These forms are also available on our website.)

Pet’s Name ________________________________  Sex  ☐ Male  ☐ Female

Date of Birth _____ / _____ / _______  Has your pet been spayed or neutered?  ☐ Yes  ☐ No

Type  ☐ Indoor  ☐ Outdoor  ☐ Cat  ☐ Dog  ☐ Bird  ☐ Horse  ☐ Other __________________________

Breed __________________________

Please indicate if your pet has the following identification:

Microchip ID (Brand) ________________  ID Number ________________

License (City or County) ________________  Tag Number ________________

Tattoo and/or Identification Marks ___________________________________________________________

Medical History (any specific information relative to the pet’s health history) ____________________________________________________________

Special Needs (such as a permanent medical condition or special exercise routine) ____________________________________________________________

Special Diet Requirements ____________________________________________________________

Behavioral Habits (examples: protective, fear of loud noises, or anything unique about your pet’s behavior) ____________________________________________________________

Please note any verbal and nonverbal commands your pet responds to as well as any body language used to communicate:

☐ Come  ☐ Sit  ☐ Stay  ☐ Down  ☐ Other __________________________

If you and your pet have unique obedience language, please describe ____________________________________________________________

Please outline your pet’s daily routine (walking, eating, sleeping, playing, eliminating) ____________________________________________________________

Is your pet allowed outside? ____________________________________________________________

Where does your pet sleep? ____________________________________________________________

What access does your pet have to your home and furniture? ____________________________________________________________

Does your pet like children? ____________________________________________________________

If your pet has any favorite games, toys or possessions, please note where they are located ____________________________________________________________

Type of flea/heartworm preventative and when administered ____________________________________________________________
PET INFORMATION (continued)

Allergies (foods, medications, fleas, flea control products, etc.) ____________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Special care instructions
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Where is your pet’s medical history located? __________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Do you maintain additional instructions for this pet? □ Yes □ No
If yes, where? ___________________________________________________________
What brand of food do you feed this pet? ______________________________
__________________________________________________________________________________

Approximately how much food per day? (for example: 3 cups/day) __________________________
__________________________________________________________________________________

When are the typical feeding times and amounts? ________________________________
__________________________________________________________________________________

List any medications and/or supplements (indicate dosage and frequency) ______________
__________________________________________________________________________________
__________________________________________________________________________________

Emergency supplies for my pet (location of leashes and harnesses, food, food bowls, medicine, and veterinarian records) ____________________
__________________________________________________________________________________

Pet Health Insurance
Do you currently own a pet insurance policy? □ Yes □ No
If yes, please provide the following information:
Name of Provider ____________________________ Phone { ________ }
Policy Number ____________________________ Cost per year ______________

In Case of Serious Illness
Should my pet become seriously ill:
□ My veterinarian should make the decision if my pet should be euthanized.
□ My caregiver should make the decision if my pet should be euthanized.
□ My emergency contacts should consult the caregiver and veterinarian to make any decision about the euthanization of my pet.

In Case of Death
When your pet dies, how do you want the pet’s remains to be cared for?
□ Burial □ Cremation □ Local Pet Cemetery □ Caregiver can determine
I would like to allocate $___________ for the cost of caring for my pet’s remains.
(You may want to include an allowance for any special markers, urns or caskets in this amount.)

RECOMMENDED RESOURCES FOR PET OWNERS

Adopting pets from animal shelters and rescue groups:
www.petfinder.com

Find a local animal shelter:
http://theshelterpetproject.org/shelters

Find a missing pet:
www.missingpetpartnership.org

Feral cats and cat education:
www.alleycat.org

Low-cost spay/neuter programs:
www.aspca.org/pet-care/spayneuter

Report animal cruelty:
www.aspca.org

Volunteer opportunities with animal organizations:
www.volunteermatch.org

Job opportunities with animal organizations:
www.opportunityknocks.org
ABOUT 2ND CHANCE FOR PETS

2nd Chance 4 Pets was established in 2004 to raise awareness and help pet owners plan for the possibility that their pets might outlive them. Our ultimate goal is to reduce the number of pets euthanized throughout the U.S. each year due to the death of their human companions.

Thousands of pets each year are surrendered and euthanized in shelters simply because the pet owner passed away and had never made plans for the continued care of their pets.

2nd Chance 4 Pets is an all-volunteer, 501(c)(3) nonprofit organization. We have no paid staff. Our volunteers are actively working nationwide to provide pet owners, veterinarians, and members of animal care organizations with comprehensive information and lifetime care solutions to ensure that our companion animals will always be cared for. We recruit talented volunteers through our partnerships with the New Hampshire Workplace Service Bureau, Volunteermatch.org, and the national Hands On Network.

In 2005, our volunteer team launched a formal program to educate veterinarians, animal welfare groups and pet owners nationwide. We provide free resources and essential materials to help pet owners plan for the lifetime care of their pets. Our volunteer team has been selected to deliver presentations and provide our literature at more than 50 veterinarian and animal welfare conferences throughout the country over the past ten years. We currently have 500,000 brochures distributed in veterinarian clinics coast-to-coast.

For a third consecutive year, we are working with Banfield Charitable Trust and Meals on Wheels to distribute our information to elderly, homebound pet owners throughout the country. We are in our second year working together with the Colorado State University Veterinary Teaching Hospital to provide information to the elderly in their community.

YOUR SUPPORT WILL HELP IN OUR EFFORT TO SAVE LIVES

We truly appreciate your recognition of our work to help animals. Thanks to your generosity, we are able to help provide peace of mind to pet owners and save the lives of thousands of pets.

Remember 2nd Chance 4 Pets in your Will

We appreciate being considered to be a recipient of bequests from our supporters by including 2nd Chance 4 Pets in their wills. Attorneys prefer to include the tax ID number in your will for the non-profit organization you are donating to. Our EIN number is 13-4280812. We are doing business as (dba) Second Chance 4 Pets.

Our address: 1484 Pollard Rd., #444, Los Gatos, CA 95032

IRA Charitable Rollover Gift

Donors 70 years old or older can roll over donations directly from a Traditional or Roth IRA to a qualified charity, including 2nd Chance 4 Pets, without paying income taxes on the funds transferred. For those donors who do not itemize deductions, a gift from an IRA is excluded from reportable income, thus simplifying tax returns. It also counts toward your required minimum distribution (RMD). Contact your IRA administrator to request a rollover. Current legislation allows for this opportunity only through December 31, 2013. Please consult with your tax advisor to make sure this is applicable to your situation.

For more information please visit our website www.2ndchance4pets.org or contact us by email at info@2ndchance4pets.org.

RESOURCES AVAILABLE ON OUR WEBSITE:

www.2ndchance4pets.org

- U.S. animal sanctuaries listed by region (including sanctuaries for birds and for senior pets)
- Perpetual care programs
- Program evaluation form
- Articles written by estate planners
- Tips for evaluating lifetime care planning options
- Pet Care Instructions Workbook (print version)
- Emergency ID cards (print version)
- Archives of our newsletters 2004-present
These cards are provided by 2nd Chance 4 Pets to post in your home and carry with you in your wallet.

**Emergency Identification Wallet Card**

In case of an emergency, please contact the caregivers listed on this card to ensure care for my pets. I have _____ pets in my home.

My Address

---

Pet’s name    Type of Animal
Pet’s Name    Type of Animal
Pet’s Name    Type of Animal

---

VETERINARIAN

Name __________________________
Phone Number(s) ____________________

After-hours pet emergency phone number

---

EMERGENCY PET CAREGIVERS

Name __________________________
Phone Number(s) ____________________

Name __________________________
Phone Number(s) ____________________

---

PLANNING FOR THE POSSIBILITY THAT YOUR PETS MIGHT OUTLIVE YOU

**STEP 1:** Identify Caregivers

Identify people who would be willing to care for your pets in the hours, days, or weeks after an emergency as well as those who would be willing to adopt your pets should you die or become incapacitated. If you cannot find friends, relatives or neighbors to serve as potential caregivers, local pet sitters and members of animal rescue groups may be able to help. If you do not identify a caregiver for your pets and your pets outlive you, a complete stranger may have to determine if and how your pets will continue to receive care.

**STEP 2:** Prepare Written Instructions

Prepare written instructions outlining how your pets should be cared for. How do you want your pets to live ... in another household or in a sanctuary? What kind of special care do your pets require? Do you want your pets to stay together? To make sure your wishes are followed, you must document your instructions and let others know where these instructions are located. On the front page of our website, download and print a free copy of our guide that will help you document care instructions for your pets.

**STEP 3:** Set Up a Fund

You currently pay for food, supplies and medical care for your pets. Should anything happen to you, these expenses will still need to be covered. Consider setting aside funds to cover temporary or permanent care of your pets. Professionals who can help you include estate planners, financial planners and your life insurance company. Take into consideration the amount you spend each year on your pets and the life expectancy of the pets.