

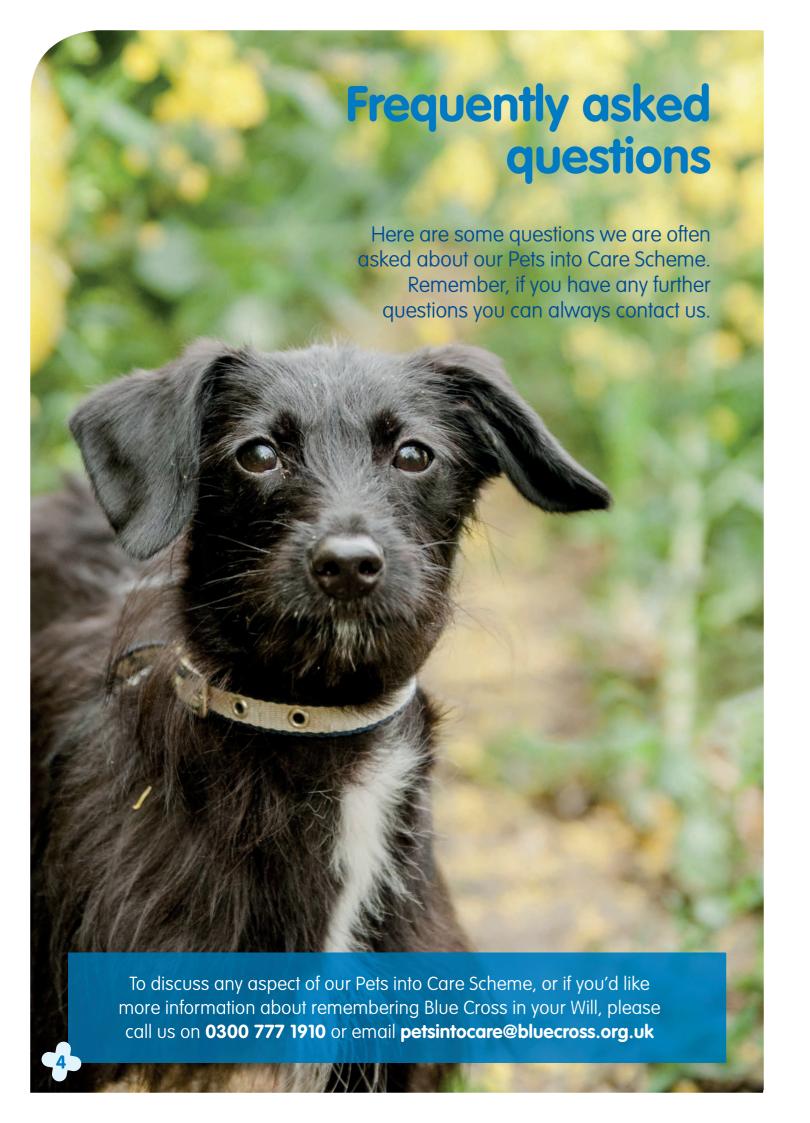






To discuss any aspect of our Pets into Care Scheme, or if you'd like more information about remembering Blue Cross in your Will, please call us on **0300 777 1910** or email **petsintocare@bluecross.org.uk**





Can I register any pet?

Dogs, cats, horses, donkeys, rabbits, chinchillas, degus, gerbils, guinea pigs, hamsters, mice and rats can be registered onto the scheme. All applications are considered on a case by case basis once we have received your application form and, if considered necessary, the pet's veterinary history.

How many pets can I register?

We can register up to four pets from each household onto the scheme. We have this limit because we need to be realistic about the number of pets we can commit to admitting to our rehoming centres as a priority in the event of an emergency.

Does my pet have to be microchipped?

Horses and donkeys, dogs and cats must be microchipped and registered to your current name and address to be registered onto the scheme. This helps us to bring the correct animals into our care and avoid any confusion as to who is the rightful owner of that pet at the time they need to come to Blue Cross. If your vet has advised that microchipping is not appropriate at this time, please provide details of your vet's reason for this and an estimate of when it will be possible to microchip your pet.

How much does it cost?

It is free to register your pets onto the scheme.

There are a number of costs to keep the scheme running and all our services are funded entirely from donations and gifts in Wills from our supporters.

We'd be very grateful if you would consider making a donation or leaving a gift in your Will.

Do I have to live near a Blue Cross rehoming centre?

No, this scheme is for anyone living in England, Scotland and Wales. Each pet is admitted to the Blue Cross rehoming centre that can best care for your pet at the time we are needed to help.

How will my pet get to Blue Cross?

At the time we are asked to admit your pet, we will discuss their current circumstances with the person contacting us and agree between us how best to transport your pet.

When can Blue Cross be contacted?

Our Pets into Care Team can be contacted on 0300 777 1910 9.00am to 5.00pm Monday to Friday and should be contacted in the first instance.

If there is a need to contact us urgently outside of those hours, our rehoming centres may be open and a list of their contact details is enclosed on our 'Where to Find Us' card. These telephone numbers are not available 24 hours a day and therefore there will be certain times during the night, over weekends and bank holidays that we will not be immediately contactable, but any messages left for the Pets into Care Team regarding the admission of pets under the scheme will be dealt with urgently on our return to the office.



Can I leave a gift in my Will to care for my pet?

We would be grateful to receive any donation or gift in your Will that you feel able to make. We cannot restrict the use of your donation or gift in your Will to be used specifically for your pet but it will be used to help all the pets we care for – including yours.

How do I ensure my wishes are followed?

We have enclosed the suggested wording that we recommend you include in your Will or codicil. Please note that the wording entrusts the future welfare of the pets you have registered onto our scheme to Blue Cross.

How does Blue Cross know it can look after my pet?

The Pets into Care Scheme is intended to give you reassurance that your pets will be looked after, but also to be a comfort and support to family, friends and executors at a time when they will be grieving. This can be a fraught time and misunderstandings can sometimes occur but our priority will always be the welfare of your pets. By registering your pets Blue Cross is accepting an obligation. You will be authorising Blue Cross to take whatever steps it thinks appropriate when neighbours/friends/carers/next of kin/executors/the authorities tell us your pets need to be cared for.

Do you need my executors or next of kin details?

Yes, all application forms must include details of your executors or next of kin and you should make them aware of the provisions you have made for your pet. The person handing over your pet to Blue Cross in the event of your death will need to sign a transfer of ownership form.

We enclose a specimen transfer of ownership form for your information so that you can see the terms on which your pet will be handed over to us.

Will you find my pet a new home, or keep them at Blue Cross?

Our rehoming centres find loving new homes for pets in our care. They undertake careful medical and behavioural assessments for every pet before rehoming.

Can my executors, next of kin or family be involved in the rehoming process?

By transferring your pet into the ownership of Blue Cross you are trusting us to look after your pet's welfare and take decisions that are in their best interests. We are unable to involve others in the rehoming process.



What happens if my pet is ill when they're due to come to Blue Cross?

We always honour the agreement we've made with you. We'll discuss any veterinary and behavioural issues your pet has with your vet, executor, next of kin or person who contacts us to admit your pet so that we can care for your pet properly and make whatever decisions are in their best interests at that time.

Will my pet be put to sleep?

Blue Cross works hard to find new homes for every pet in their care. However, it may be necessary to euthanise a minority of pets brought to Blue Cross for veterinary or behavioural reasons. Such a decision is only ever taken after careful assessment and consideration by our expert teams. In all circumstances the prime concern is the welfare and quality of life of the pet and the safety of people and pets with whom they may come into contact.

What if I get another pet?

You will need to make an application for each new pet you'd like to register onto the Pets into Care Scheme, limited to four pets per household.

You can trust us to look after your pet



Sick, injured and homeless pets have relied on us since 1897. We take our commitment to these pets seriously. You are also very important to us as we know how much your pet means to you. It is our promise to you that we'll do everything we can to care properly for every pet who comes to us.

A part of that commitment is the use of our expertise to ensure that your pet is settled into a happy home with loving, suitable owners.

How you can help us The Pets into Care Scheme is completely free, but we'd be grateful if you'd consider remembering Blue Cross in your Will. It's simple to include a gift to Blue Cross in your Will or, if you already have a Will, add a gift to Blue Cross by completing a codicil. If you would like further information about this please contact our Pets into Care Team on **0300 777 1910** or email petsintocare@bluecross.org.uk

Suggested wording for insertion in Will or codicil

Legacy of my registered animals

I give such of my animals living at the date of my death as are registered with the Blue Cross Pets into Care Scheme to Blue Cross registered charity number 224392 (England and Wales) and SCO40154 (Scotland) of Shilton Road, Burford, Oxfordshire, OX18 4PF. Blue Cross shall take such steps as it judges to be in the best interests of the animals concerned for their future wellbeing.

I direct that my executors shall contact the Pets into Care Team at Blue Cross, Shilton Road, Burford, Oxfordshire, OX18 4PF and deliver my animals as agreed with Blue Cross including signing a transfer of ownership form so that Blue Cross take over responsibility for my animals from my executors.

Optional

To leave a residuary legacy

Gift in your Will

I give to Blue Cross, registered charity number 224392 (England and Wales) and SCO40154 (Scotland) of Shilton Road, Burford, Oxfordshire, OX18 4PF [enter percentage] per cent of my residuary estate and I express the wish (but without imposing any binding obligation) that such legacy be used for [the general purposes of Blue Cross] [the benefit of its centre at [insert name and address of centre]. The receipt of a Duly Authorised Officer of Blue Cross shall be a good discharge to my executors for the gift.

To leave a pecuniary legacy (cash sum)

Gift in your Will

I give to Blue Cross, registered charity number 224392 (England and Wales) and SCO40154 (Scotland) of Shilton Road, Burford, Oxfordshire, OX18 4PF the sum of [insert amount in figures and words] and I express the wish (but without imposing any binding obligation) that such legacy be used for [the general purposes of Blue Cross] [the benefit of its centre at [insert name and address of centre]. The receipt of a Duly Authorised Officer of Blue Cross shall be a good discharge to my executors for the gift.

You may like to tear out this page and take it to your solicitor when you are discussing your Will or codicil with them.



SECTION 1: Your details



Please fill in ALL 3 SECTIONS of this application form

| Your details: | Vets details: |
|--|---|
| Mr/Mrs/Ms/Miss (please circle) | Vet's Name: |
| Name: | Address: |
| Address: | |
| | Postcode: |
| | Telephone: |
| Postcode: | Email: |
| Telephone: | PLEASE ALSO COMPLETE THE ENCLOSED VET RELEASE FORM AND RETURN IT WITH YOUR APPLICATION. |
| Email: | It may be necessary for us to contact your vet for more information about your pet before confirming whether they |
| Date of Birth: | can be accepted onto the scheme. |
| Joint owner's details: | |
| Mr/Mrs/Ms/Miss (please circle) | Executors/Next of Kin details: |
| Name: | PLEASE NOTE THAT WE CANNOT REGISTER YOUR PETS WITHOUT THIS INFORMATION. |
| Address: | Mr/Mrs/Ms/Miss (please circle) |
| , ida. 666. | Name: |
| | Address: |
| Postcode: | |
| Telephone: | Postcode: |
| Email: | Telephone: |
| Date of Birth: | Email: |
| Relationship to you: | Relationship to you: |
| | |
| | |
| DECLARATION: | |
| cheme is intended to give you reassurance that your pets will be lo executors at a time when they will be grieving. This can be a fraugh flways be the welfare of your pets. By registering your pets Blue Cro | als listed and that the information I have given is correct. The Pets into Care booked after, but also to be a comfort and support to family, friends and at time and misunderstandings can sometimes occur but our priority will cost is accepting an obligation. You will be authorising Blue Cross to take ers/next of kin/executors/the authorities tell us your pets need to be cared for. |
| igned: (Owner) | Dated: |
| igned: (Joint Owner) | Dated: |
| | |
| Ve'd like to tell you about the great work we do for pe | CDCPETS |

Phone: Yes No Mail: Yes No Email: Yes No (We will never sell or share your data).

SECTION 2: Your pet's details

Pets into Care application form

Cats, dogs and small animals

Pet number 1: Name:

Please note, if you are registering horses or ponies, please fill in the form overleaf instead.

Breed:

We must receive the microchip number of all cats and dogs to be registered into the scheme. If you have received vet advice against microchipping your pet, please provide the vet's reasons for this and a date when you anticipate being able to microchip your pet.

| Date of birth: Sex: Male Female Neutered: Yes No | |
|--|-------------------------|
| Where did you get your pet from? | |
| If from a rescue centre, please specify which one: | |
| For dogs and cats: | |
| Microchip No: | |
| If not microchipped, vet reason: Date microchipping to take place: | |
| | |
| Further information: Y/N Details | Length of time |
| Was your pet imported from abroad? | |
| Medical conditions? Behaviour problems? | |
| Current medication? | |
| Incontinence? | |
| Disability or condition that | |
| requires specific management? | |
| It may be necessary for us to contact your vet for more information about your pet before confirming whether they can be a | ccepted onto the Scheme |
| | _ |
| Pet number 2: Name: Type of pet: Breed: | |
| | |
| Date of birth: Sex: Male Female Neutered: Yes No | |
| Date of birth: Sex: Male Female Neutered: Yes No | |
| Date of birth: Sex: Male Female Neutered: Yes No Where did you get your pet from? | |
| Date of birth: Sex: Male Female Neutered: Yes No Where did you get your pet from? If from a rescue centre, please specify which one: | |
| Date of birth: Sex: Male Female Neutered: Yes No Where did you get your pet from? If from a rescue centre, please specify which one: For dogs and cats: | |
| Date of birth: Sex: Male Female Neutered: Yes No Where did you get your pet from? If from a rescue centre, please specify which one: | |
| Date of birth: Sex: Male Female Neutered: Yes No Where did you get your pet from? If from a rescue centre, please specify which one: For dogs and cats: | |
| Date of birth: Sex: Male Female Neutered: Yes No Where did you get your pet from? If from a rescue centre, please specify which one: For dogs and cats: Microchip No: | Length of time |
| Date of birth: Sex: Male Female Neutered: Yes No Where did you get your pet from? If from a rescue centre, please specify which one: For dogs and cats: Microchip No: If not microchipped, vet reason: Date microchipping to take place: | Length of time |
| Date of birth: Sex: Male Female Neutered: Yes No Where did you get your pet from? If from a rescue centre, please specify which one: For dogs and cats: Microchip No: If not microchipped, vet reason: Date microchipping to take place: Further information: Y/N Details | Length of time |
| Date of birth: Sex: Male Female Neutered: Yes No Where did you get your pet from? If from a rescue centre, please specify which one: For dogs and cats: Microchip No: If not microchipped, vet reason: Date microchipping to take place: Further information: Y/N Details Was your pet imported from abroad? | Length of time |
| Date of birth: Sex: Male Female Neutered: Yes No Where did you get your pet from? If from a rescue centre, please specify which one: For dogs and cats: Microchip No: If not microchipped, vet reason: Date microchipping to take place: Further information: Y/N Details Was your pet imported from abroad? Medical conditions? | Length of time |
| Date of birth: Sex: Male Female Neutered: Yes No Where did you get your pet from? If from a rescue centre, please specify which one: For dogs and cats: Microchip No: If not microchipped, vet reason: Date microchipping to take place: Further information: Was your pet imported from abroad? Medical conditions? Behaviour problems? | Length of time |

It may be necessary for us to contact your vet for more information about your pet before confirming whether they can be accepted onto the Scheme.

| Pet number 3: Name: | Type of pet: | Breed: |
|--|--|---|
| Date of birth: | ex: Male Female Neutered: Yes | s No |
| Where did you get your pet from? | | |
| If from a rescue centre, please specify which a | nne. | |
| | A.C. | |
| For dogs and cats: | | |
| Microchip No: | | |
| If not microchipped, vet reason: | Date microchipping | to take place: |
| Further information: Y/N | Details | Length of time |
| Was your pet imported from abroad? | | |
| Medical conditions? | | |
| Behaviour problems? | | |
| Current medication? | | |
| Incontinence? | | |
| Disability or condition that requires specific management? | | |
| | ore information about your pet before confirming v | whather they can be accepted ento the Schor |
| lay be necessary for as to contact your vertor me | Te illiotridiot about you per belore committing v | whether they can be accepted of no the series |
| Pet number 4: Name: | Type of pet: | Breed: |
| Date of birth: | ex: Male Female Neutered: Yes | s No |
| Where did you get your pet from? | | |
| If from a rescue centre, please specify which | one: | |
| For dogs and cats: | | |
| Microchip No: | | |
| If not microchipped, vet reason: | Date microchipping | to take place. |
| ii noi microcnipped, verredson. | Date Hild och ippling | to take place. |
| Further information: Y/N | Details | Length of time |
| Was your pet imported from abroad? | | |
| Medical conditions? | | |
| Behaviour problems? | | |
| Current medication? | | |
| Incontinence? Disability or condition that | | |
| requires specific management? | | |
| may be necessary for us to contact your vet for mo nfirming whether they can be accepted onto the S | | Contract Contract |
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SECTION 2:

Your horse or pony's details



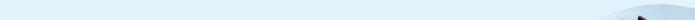
Please note, if you are registering dogs, cats or small animals, please fill in the previous form instead.

We must receive a copy of the passport's ID page, ownership page, vaccination record page(s) and details of microchip number of all horses or ponies to be registered onto the scheme. If you have received vet advice against microchipping your pet, please provide the vet's reasons for this and a date when you anticipate being able to microchip your pet.

| Horse I: Name: | Age: | Height: | Colour: | Sex: |
|--|---|--|--|--|
| Address where horse kept (if different f | rom owners address): | How long have you | owned the horse? | |
| | | Where did you get y | our horse from? | |
| Microchip No: | | | ue centre, please spe | cify which one |
| If not microchipped, vet reason: | | ii iioiii anomer resec | oc come, piedoc spe | city which one. |
| Date microchipping to take place: | | Can the horse be ric | dden? Yes No | If not, why? |
| Description, including breed/type, distinguished | nctive markings: | | 100 | ii iioi, iiiiy . |
| | | Can the horse be ea | asilv loaded? | Yes No |
| | | Is there a history of a | | Yes No |
| | | | the horse capable of | |
| | | What type of Work is | The horse capable of | |
| Further information: | Y/N Details | | | Length of time |
| Medical conditions? | | | | |
| Current medication/treatment? | | | | |
| Dietary requirements? | | | | |
| | | | | |
| Training/behaviour issues? | | | | |
| Training / behaviour issues? Disability or condition that requires specific management? and be necessary for us to contact your vertical to the second seco | t for more information about | your pet before confirming | g whether they can be | accepted onto the Sc |
| Disability or condition that requires specific management? hay be necessary for us to contact your very | | | | |
| Disability or condition that requires specific management? nay be necessary for us to contact your verther than the properties of the pro | Age: | Height: | Colour: | accepted onto the Sc Sex: |
| Disability or condition that requires specific management? hay be necessary for us to contact your very | Age: | Height: How long have you | Colour: | |
| Disability or condition that requires specific management? nay be necessary for us to contact your very dependent of the contact your very dependent your very dependent of the contact your very dependent of the contact your very dependent of the contact your very dependent your very d | Age: | Height: How long have you Where did you get y | Colour: owned the horse? our horse from? | Sex: |
| Disability or condition that requires specific management? nay be necessary for us to contact your very specific management. Horse 2: Name: Address where horse kept (if different for the di | Age: | Height: How long have you Where did you get y | Colour: | Sex: |
| Disability or condition that requires specific management? may be necessary for us to contact your verification. Horse 2: Name: Address where horse kept (if different forms the contact your verification). Microchip No: | Age: | Height: How long have you Where did you get y If from another rescu | Colour: owned the horse? our horse from? ue centre, please spe | Sex: |
| Disability or condition that requires specific management? nay be necessary for us to contact your very specific management? Horse 2: Name: Address where horse kept (if different for microchipped, vet reason: Date microchipping to take place: | Age: rom owners address): | Height: How long have you Where did you get y | Colour: owned the horse? our horse from? ue centre, please spe | Sex: |
| Disability or condition that requires specific management? may be necessary for us to contact your verification. Horse 2: Name: Address where horse kept (if different forms the contact your verification). Microchip No: | Age: rom owners address): | Height: How long have you Where did you get y If from another rescu | Colour: owned the horse? our horse from? ue centre, please spe | Sex: |
| Disability or condition that requires specific management? nay be necessary for us to contact your very specific management? Horse 2: Name: Address where horse kept (if different for microchipped, vet reason: Date microchipping to take place: | Age: rom owners address): | Height: How long have you Where did you get y If from another rescu | Colour: owned the horse? your horse from? ue centre, please spe dden? Yes No asily loaded? | Sex: cify which one: If not, why? Yes No |
| Disability or condition that requires specific management? nay be necessary for us to contact your very specific management? Horse 2: Name: Address where horse kept (if different for microchipped, vet reason: Date microchipping to take place: | Age: rom owners address): | Height: How long have you Where did you get y If from another rescue Can the horse be rice Can the horse be ed Is there a history of company to the second se | Colour: owned the horse? rour horse from? ue centre, please spe dden? Yes No asily loaded? difficult travelling? | Sex: cify which one: If not, why? Yes No Yes No |
| Disability or condition that requires specific management? nay be necessary for us to contact your very specific management? Horse 2: Name: Address where horse kept (if different for microchipped, vet reason: Date microchipping to take place: | Age: rom owners address): | Height: How long have you Where did you get y If from another rescue Can the horse be rice Can the horse be ed Is there a history of company to the second se | Colour: owned the horse? your horse from? ue centre, please spe dden? Yes No asily loaded? | Sex: cify which one: If not, why? Yes No Yes No |
| Disability or condition that requires specific management? nay be necessary for us to contact your very service. Horse 2: Name: Address where horse kept (if different for Microchip No: If not microchipped, vet reason: Date microchipping to take place: Description, including breed/type, distinguished. | Age: rom owners address): | Height: How long have you Where did you get y If from another rescue Can the horse be rice Can the horse be ed Is there a history of company to the second se | Colour: owned the horse? rour horse from? ue centre, please spe dden? Yes No asily loaded? difficult travelling? | Sex: cify which one: If not, why? Yes No Yes No |
| Disability or condition that requires specific management? nay be necessary for us to contact your very specific management? Horse 2: Name: Address where horse kept (if different for microchipped, vet reason: Date microchipping to take place: | Age: rom owners address): nctive markings: | Height: How long have you Where did you get y If from another rescue Can the horse be rice Can the horse be ed Is there a history of company to the second se | Colour: owned the horse? rour horse from? ue centre, please spe dden? Yes No asily loaded? difficult travelling? | Sex: If not, why? Yes No Yes No ? |
| Disability or condition that requires specific management? may be necessary for us to contact your verification. Horse 2: Name: Address where horse kept (if different for Microchip No: If not microchipped, vet reason: Date microchipping to take place: Description, including breed/type, distinguished. | Age: rom owners address): nctive markings: | Height: How long have you Where did you get y If from another rescue Can the horse be rice Can the horse be ed Is there a history of company to the second se | Colour: owned the horse? rour horse from? ue centre, please spe dden? Yes No asily loaded? difficult travelling? | Sex: If not, why? Yes No Yes No ? |
| Disability or condition that requires specific management? hay be necessary for us to contact your very specific management? Horse 2: Name: Address where horse kept (if different for microchipped, vet reason: Date microchipping to take place: Description, including breed/type, distinguished to the place: Further information: Medical conditions? | Age: rom owners address): nctive markings: | Height: How long have you Where did you get y If from another rescue Can the horse be rice Can the horse be ed Is there a history of company to the second se | Colour: owned the horse? rour horse from? ue centre, please spe dden? Yes No asily loaded? difficult travelling? | Sex: If not, why? Yes No Yes No ? |
| Disability or condition that requires specific management? may be necessary for us to contact your verification. Horse 2: Name: Address where horse kept (if different formation formation): Date microchipped, vet reason: Description, including breed/type, distinct formation: Medical conditions? Current medication / treatment? | Age: rom owners address): nctive markings: | Height: How long have you Where did you get y If from another rescue Can the horse be rice Can the horse be ed Is there a history of company to the second se | Colour: owned the horse? rour horse from? ue centre, please spe dden? Yes No asily loaded? difficult travelling? | Sex: If not, why? Yes No Yes No ? |
| Disability or condition that requires specific management? Inay be necessary for us to contact your version of the proof | Age: rom owners address): nctive markings: | Height: How long have you Where did you get y If from another rescue Can the horse be rice Can the horse be ed Is there a history of company to the second se | Colour: owned the horse? rour horse from? ue centre, please spe dden? Yes No asily loaded? difficult travelling? | Sex: If not, why? Yes No Yes No ? |

It may be necessary for us to contact your vet for more information about your pet before confirming whether they can be accepted onto the Scheme.

| Horse 3: Name: | Age: | Height: | Colour: | Sex: | |
|--|-----------------------------------|--|--|---|--|
| Address where horse kept (if different from | owners address): | How long have vol | u owned the horse? | | |
| | | Where did you get | | | |
| Microchip No: | Microchip No: | | If from another rescue centre, please specify which one: | | |
| If not microchipped, vet reason: | | | | | |
| Date microchipping to take place: | | Can the horse be ri | idden? Yes No | If not, why? | |
| Description, including breed/type, distinctive | e markings: | | | | |
| | | Can the horse be e | easily loaded? | Yes No | |
| | | Is there a history of | | Yes No | |
| | | What type of work is | is the horse capable o | ıf? | |
| Further information: | Y/N Details | | | Length of time | |
| Medical conditions? | | | | | |
| Current medication / treatment? | | | | | |
| Dietary requirements? | | | | | |
| Training / behaviour issues? | | | | | |
| | | | | | |
| Disability or condition that requires specific management? | | | | | |
| requires specific management? | more information abou | t your pet before confirmir | ng whether they can be | e accepted onto the Scheme | |
| requires specific management? | more information abou | t your pet before confirmir Height: | ng whether they can be Colour: | e accepted onto the Scheme | |
| requires specific management? may be necessary for us to contact your vet for r | Age: | Height: | | | |
| requires specific management? may be necessary for us to contact your vet for r Horse 4: Name: | Age: | Height: | Colour: u owned the horse? | | |
| requires specific management? may be necessary for us to contact your vet for r Horse 4: Name: | Age: | Height: How long have you Where did you get | Colour: u owned the horse? | Sex: | |
| requires specific management? may be necessary for us to contact your vet for r Horse 4: Name: Address where horse kept (if different from | Age: | Height: How long have you Where did you get | Colour: u owned the horse? your horse from? | Sex: | |
| requires specific management? may be necessary for us to contact your vet for remarks. Horse 4: Name: Address where horse kept (if different from Microchip No: | Age: | Height: How long have you Where did you get | Colour: u owned the horse? your horse from? cue centre, please sp | Sex: | |
| requires specific management? may be necessary for us to contact your vet for responsible. Horse 4: Name: Address where horse kept (if different from Microchip No: If not microchipped, vet reason: | Age:owners address): | Height: How long have you Where did you get If from another reso | Colour: u owned the horse? your horse from? cue centre, please sp | Sex: ecify which one: | |
| requires specific management? may be necessary for us to contact your vet for responsible. Horse 4: Name: Address where horse kept (if different from Microchip No: If not microchipped, vet reason: Date microchipping to take place: | Age:owners address): | Height: How long have you Where did you get If from another reso | Colour: u owned the horse? your horse from? cue centre, please sp idden? Yes No | Sex: ecify which one: | |
| requires specific management? may be necessary for us to contact your vet for responsible. Horse 4: Name: Address where horse kept (if different from Microchip No: If not microchipped, vet reason: Date microchipping to take place: | Age:owners address): | Height: How long have you Where did you get If from another reso Can the horse be ri Can the horse be e Is there a history of | Colour: u owned the horse? your horse from? cue centre, please sp idden? Yes No easily loaded? difficult travelling? | ecify which one: If not, why? Yes No Yes No | |
| requires specific management? may be necessary for us to contact your vet for responsible to the contact your vet for respons | Age:owners address): | Height: How long have you Where did you get If from another reso Can the horse be ri Can the horse be e Is there a history of | Colour: u owned the horse? your horse from? cue centre, please sp idden? Yes No easily loaded? | ecify which one: If not, why? Yes No Yes No | |
| requires specific management? may be necessary for us to contact your vet for responsible. Horse 4: Name: Address where horse kept (if different from Microchip No: If not microchipped, vet reason: Date microchipping to take place: | Age:owners address): | Height: How long have you Where did you get If from another reso Can the horse be ri Can the horse be e Is there a history of | Colour: u owned the horse? your horse from? cue centre, please sp idden? Yes No easily loaded? difficult travelling? | ecify which one: If not, why? Yes No Yes No | |
| requires specific management? may be necessary for us to contact your vet for responsible to the contact your vet for respons | Age: owners address): e markings: | Height: How long have you Where did you get If from another reso Can the horse be ri Can the horse be e Is there a history of | Colour: u owned the horse? your horse from? cue centre, please sp idden? Yes No easily loaded? difficult travelling? | ecify which one: If not, why? Yes No Yes No | |
| requires specific management? may be necessary for us to contact your vet for re Horse 4: Name: Address where horse kept (if different from Microchip No: If not microchipped, vet reason: Date microchipping to take place: Description, including breed/type, distinctive | Age: owners address): e markings: | Height: How long have you Where did you get If from another reso Can the horse be ri Can the horse be e Is there a history of | Colour: u owned the horse? your horse from? cue centre, please sp idden? Yes No easily loaded? difficult travelling? | ecify which one: If not, why? Yes No Yes No | |
| requires specific management? may be necessary for us to contact your vet for responsible to the contact your vet for respons | Age: owners address): e markings: | Height: How long have you Where did you get If from another reso Can the horse be ri Can the horse be e Is there a history of | Colour: u owned the horse? your horse from? cue centre, please sp idden? Yes No easily loaded? difficult travelling? | ecify which one: If not, why? Yes No Yes No | |
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| requires specific management? may be necessary for us to contact your vet for responsible to the contact your vet for respons | Age: owners address): e markings: | Height: How long have you Where did you get If from another reso Can the horse be ri Can the horse be e Is there a history of | Colour: u owned the horse? your horse from? cue centre, please sp idden? Yes No easily loaded? difficult travelling? | ecify which one: If not, why? Yes No Yes No | |





Please attach a copy of the passport ID page, ownership page and full vaccination record page(s) for each horse or pony.



SECTION 3: Veterinary history release form



It may be necessary for us to contact your vet for more information about your pet before confirming whether they can be accepted onto the scheme.

| | (name and address of veterinary surgeon) |
|--|---|
| I, | (name of owner) |
| Of, | (address of owner) |
| hereby consent to the disclosure to Blue | Cross of all details relating to the treatment of |
| | (pet's name) |
| Date: | |
| | |
| Signature: | |
| | |
| | |





Checklist

Please ensure you have included:



SECTION 1

Your details



SECTION 2

Your pet's details

and/or



SECTION 3

Veterinary release form



Your horse or pony's details

FOR EACH HORSE OR PONY ATTACH COPIES OF:

THE PASSPORT ID PAGE

OWNERSHIP PAGE

FULL VACCINATION



Now tear out your completed application forms and veterinary history release form and post to us at:

Pets into Care Team, **Blue Cross,** Shilton Road, Burford, Oxfordshire, **OX18 4PF**

For more information please visit www.bluecross.org.uk or email: petsintocare@bluecross.org.uk or call: 0300 777 1910

