



Application Checklist

Cat or Rabbit Therapy Team

- ♥ **NOTE:** Every person who will be a handler for a cat or rabbit must submit a completed **Control Evaluation, Supervised Visits Log, Visit Evaluation, and Membership Application.**
- ♥ All paperwork in this packet and payment must be fully completed and mailed **together** (except for photos which are emailed). **Please keep copies of all of your submitted paperwork for your records and in case of lost or damaged application packets.** Incomplete applications and/or incorrect fees are the most common reasons for delays or returns.
- ♥ **Applications may take up to 4 weeks to process.**

Please read and double-check the instructions on each form!

Questions? Email info@loveonaleash.org or call Love on a Leash® at (760) 740-2326.

CHECKLIST:

- ♥ READ the Love on a Leash® **Membership Guidelines.**
- ♥ READ each page of this **Application** BEFORE YOU START to ensure a successful submission.

PART I.

Submit by USPS in one envelope: (PLEASE DO NOT STAPLE)

- ♥ Completed **Love on a Leash® Control Evaluation (most current version at time of evaluation)** (p.6)
- ♥ Completed **Supervised Visits Log** (p.8 & 9)
- ♥ Completed **Visit Evaluation** (p.13)
- ♥ Completed **Membership Application pages** (all three pages (p.14, 15 & 16) are required)
- ♥ Check or money order for the appropriate **fees and certification dues** (p.15)
- ♥ Training bandana, if ordered (p.2)

All documents above must be completed and POSTMARKED within one year from the date of the Control Evaluation. NO EXCEPTIONS.

Mail to:
Love on a Leash®
PO Box 4548
Oceanside, CA 92052-4548

(Please do not send by UPS or FedEx. They do not deliver to PO Boxes.)
(Applicant is responsible for any service charges or fees incurred from a returned check.)

PART II.

Submit by EMAIL to: membership@loveonaleash.org

Include your full name, your pet's call name, breed, phone number, and address.

- ♥ **ID Photos:** One each, color, unedited portrait photos of **your pet's face** (no toys or costume) and **your face** (alone, no hat, sunglasses or darkened progressive lenses).
- ♥ **Insurance Photos:** Two (2) full-body unedited photos of your **pet** (left and right sides).



The Beverly Hodges Team-in-Training Pet Bandana



The Beverly Hodges Team-in-Training Pet Bandanas are designed for new teams in the process of becoming certified as therapy pets with Love on a Leash®. The bandanas have been named after one of our original members Beverly Hodges.

Beverly, who loved to sew, would go to each Therapy graduating class at Kindred Spirits Canine Training Yard (the original dog training yard of our founder, Liz Palika) and measure each of the dogs' necks, then sew the bandanas, and add a patch for each graduating dog. When it became too difficult for Beverly to continue, National asked her if she would allow us to adopt her idea and patterns, thereby introducing them nationwide. She happily agreed. Beverly passed away in May 2025. As one of the original members of Love on a Leash®, pet therapy was her passion. Beverly was a Visit Captain at several locations and she supervised and mentored countless teams-in-training. She volunteered on the National Board for over a decade where she helped write the Membership Guidelines that are in place today. The Board felt it was a fitting and beautiful tribute to carry Beverly in everyone's hearts by naming these bandanas after her. We hope that every pet wears one of our training bandanas with honor in memory of Beverly Hodges.

Our training bandanas are optional, but serve as a lovely reminder that a team is well on its way to pet therapy certification through Love on a Leash®. Training bandanas may not be worn after a team is certified, as the distinct gingham pattern is intended to provide a quick visual identifier for teams-in-training.

Training bandana sizing (inches refer to neck sizes that the bandanas may be comfortably tied around; bandanas may also be tied to collars for extra-large necks):

XS = 10"

S = 15"

M = 20"

L = 23"

Teams-in-training who would like to obtain a training bandana, please email assistant@loveonaleash.org. **Please include** the chapter name where you will be supervised or your Supervisor's name. **Please also include** a scan or photo of your **successfully completed Control Evaluation**. National will respond with ordering instructions and how to pay the refundable \$20 deposit.

A personalized letter accompanies each bandana, explaining the return policy for a full refund. Teams will also receive a full refund if they decide not to complete certification, but return the bandana.

It is essential to remember that these training bandanas are the property of Love on a Leash® and are the team-in-training's responsibility. Soiled bandanas may be gently laundered prior to returning, but this step is not necessary.



Control Evaluator Guidelines for CONTROL Evaluation for Cats or Rabbits

- ♥ **This evaluation for cats or rabbits must be administered by a licensed veterinarian and must be fully and successfully completed before going on any Supervised Visit.**
- ♥ Candidates for membership must be at least 18 years old and may not evaluate their own pets or pets they may become certified with. The Control Evaluation and the Visit Evaluation are to be done by two different evaluators and may not be in the same family or household.
- ♥ Your pet must be a minimum of one year old before beginning the certification process. If a rescue, re-homed or career change pet, it is strongly recommended you take a minimum of 6 months to bond with this pet and get to know its reactions in various situations.
- ♥ **NO treats, calming or anxiety meds, or other incentives** may be used during the evaluation.
- ♥ The Love on a Leash® Control Evaluation tests the temperament of the cat or rabbit and the amount of control the handler has in various situations. These guidelines are meant to give the evaluator objective criteria and to make the test as consistent as possible in all parts of the country.

1. I have read and will abide by the Love on a Leash® Evaluator Guidelines (pages 2-5) accompanying this form when evaluating this team.

As an evaluator you are responsible for deciding whether or not this team is ready to begin their supervised visits. By signing off on a team you acknowledge that this team has satisfactorily performed all required tasks on the Love on a Leash® Control Evaluation. Please include a business card in case you need to be contacted by National Love on a Leash®.

2. I, the evaluator, have verified that this pet is at least one year old.

If the cat or rabbit is not at least one year old, then the cat or rabbit may not be evaluated until they reach one year.

3. Is the pet healthy and clean?

The cat or rabbit should be prepared for this evaluation as he would be for an actual visit. He should be clean, brushed, and trimmed if necessary. His nails should be trimmed and filed so they will not easily scratch. He should be visibly well cared for.

4. Is the pet up to date on all recommended vaccinations?

The cat or rabbit must be up to date with any shots mandated in your state.

5. Does the pet owner safely control the pet around people and other animals?

The pet should be comfortable in the handler's arms or on a table. Even if the cat or rabbit is friendly, the handler must be mindful of other animals that may also be on visits who may not be as friendly. The cat or rabbit should never be placed on the ground or near another animal that the handler does not know. You should have one of your employees approach the cat or rabbit in an erratic manner, and observe both the handler and the pet to make sure the pet does not become scared and try to run, scratch, swipe, swat, or bite.



6. Does the pet wear a leash, collar, harness, or other control device?

Love on a Leash® requires all pets to be on a 4-foot leash at all times while on any Love on a Leash® visit. The cat or rabbit may wear either a collar or harness to which the leash must be attached. For this evaluation, the pet should wear and be comfortable in a collar or harness with a 4-foot leash.

7. Is the pet house-trained? If No, does this appear to be a problem? (For example, rabbits should be held in a towel.)

The cat or rabbit should not urinate when fearful or anxious. Similar to a dog, the handler should allow the cat or rabbit ample time to do their business before a visit begins.

8. Has the pet been well-mannered during this exam?

The cat or rabbit must have appeared to have enjoyed being examined, touched after being petted, and held during this exam.

9. Does the pet seem to enjoy being touched or handled by people other than the handler?

You, the veterinarian, should pet and hold the cat or rabbit to see if the pet enjoys being touched and held by someone other than the handler. Employees at the veterinarian's office should also pet the cat or rabbit to be sure they enjoy being petted and held by multiple people, if possible. While petting the cat or rabbit, also pet the nose and ears. The pet should appear relaxed and content.

10. Does the pet's personality seem to suggest that this pet would make a good therapy pet?

Are there areas that could use some work? These may be areas that would disqualify the cat or rabbit for therapy work or there may be something that the evaluator feels one or both could be better with practice or training. A couple of examples may be that the cat or rabbit only enjoys being looked at and not petted, or the cat or rabbit appears nervous. Or perhaps the cat or rabbit enjoys being petted for a very short period of time and then swipes or bites whoever is petting him.

11. Are you comfortable recommending this pet for Love on a Leash® pet therapy certification?

Does the cat or rabbit seem relaxed and enjoy being in the company of others? If there is no fear or anxiety detected, and no sudden urination, then this animal should enjoy being a therapy pet.

12. Does this pet exhibit signs of struggling, fighting, scratching, swiping, or biting?

If there is the slightest sign of stress exhibited through struggling, fighting, scratching, swiping, swatting, or biting, the evaluation must be discontinued, and the pet must be disqualified.

13. Does the pet or handler appear to have any training difficulties, physical or emotional limitations, or behavior problems that may interfere with their ability to work as a therapy team?

Are there areas that could use some work? These may be areas that would disqualify or show concern for the pet or handler for therapy work or they may just be something that the evaluator feels they could use more time to become a better therapy team. You may offer suggestions to help the handler better prepare the cat or rabbit for therapy work.



CONTROL EVALUATION for Cats or Rabbits

Page 1 of 2

Instructions:

- ♥ **Note: YOU MUST COMPLETE AND PASS THE CONTROL EVALUATION before starting your Supervised Visits.**
- ♥ The Control Evaluation must be completed by a licensed veterinarian.
- ♥ Candidates for membership must be at least 18 years old and may not evaluate their own pets or pets they may become certified with. The Control Evaluation and the Visit Evaluation must be completed by two different evaluators and may not be in the same family or household.
- ♥ **NO treats, calming or anxiety meds, or other incentives** may be used during this evaluation.
- ♥ **Make a copy of this completed Control Evaluation (p.6) to carry during Supervised Visits.**
- ♥ ***Supervised Visits and the entire Membership Application must be completed and postmarked within one year from the date of the Control Evaluation.***

NOTE: ANY PET WHO SHOWS AGGRESSION TOWARD OR INJURES A PERSON OR ANOTHER ANIMAL (INCLUDING SWATTING OR SWIPING) IS AUTOMATICALLY DISQUALIFIED.
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Continue to next page for the Control Evaluation Form



CONTROL EVALUATION for Cats or Rabbits

Page 2 of 2

Pet's Name _____ Breed _____ DOB _____ *must be 1 Yr or older*
(MM/DD/YYYY, or date of rescue if DOB unknown)

Handler's Legal Name _____

Phone Number _____ Email _____

Handler's Address _____ City _____ State _____ Zip _____

1. I have read and will abide by the Love on a Leash® Evaluator Guidelines (page 3-5) accompanying this form, when evaluating this team..... ☐ YES ☐ NO
2. I, the evaluator, have verified that this pet is at least one year old..... ☐ YES ☐ NO
3. Is the pet healthy and clean?..... ☐ YES ☐ NO
4. Is the pet up to date on all recommended vaccinations?..... ☐ YES ☐ NO
5. Does the pet owner safely control the pet around people and other animals?..... ☐ YES ☐ NO
6. Does the pet wear a leash, collar, harness, or other control device?..... ☐ YES ☐ NO
7. Is the pet house-trained?..... ☐ YES ☐ NO
If not, does this appear to be a problem? *(For example, rabbits should be held in a towel.)*
Comment: _____
8. Has the pet been well-mannered during this exam?..... ☐ YES ☐ NO
9. Does the pet seem to enjoy being touched or handled by people other than the handler?..... ☐ YES ☐ NO
10. Does the pet's personality seem to suggest that this pet would make a good therapy pet?
..... ☐ YES ☐ NO
11. Do you recommend that this pet be included in our therapy pet program?..... ☐ YES ☐ NO
12. Does this pet exhibit any signs of struggling, fighting, scratching, swiping, or biting?..... ☐ YES ☐ NO
13. Does the **pet** or **handler** appear to have any training difficulties, physical or emotional limitations, or behavior problems that may interfere with their ability to work as a therapy team?..... ☐ YES ☐ NO
(If yes, explain on back of this page)

FOR VETERINARIAN ONLY: Fill out completely ***and legibly***. Incomplete Control Evaluations will not be considered.

Full Name: _____

Clinic Name: _____

Clinic Address: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

Veterinarian's Signature: _____ Date of Evaluation: _____

(MM/DD/YYYY)



SUPERVISED VISITS LOG for Cats or Rabbits

Page 1 of 2



- ♥ **NOTE: Your Control Evaluation is to be completed before starting your Supervised Visits.**
- ♥ ***On each visit, you must bring your Supervised Visits Log and a copy of your completed Control Evaluation.***
- ♥ ***No treats, calming or anxiety meds, or other incentives may not be offered during visits.***
- ♥ Only enter a facility or do visits when accompanied by a Visit Captain, Certified Love on a Leash® Team, or a substitute **pre-approved** in writing or email by National Love on a Leash®. **If you do not seek pre-approval for a substitute, your application packet will be rejected.**
- ♥ Contact a chapter near you for a list of approved visits. If there is no chapter near you, contact Love on a Leash® for instructions. Hardware stores, pet stores, malls, fairs, festivals, social events, community walks, public events, or similar venues are not acceptable as supervised visits for teams-in-training.
- ♥ Candidates for membership and evaluators may not evaluate their own pets or pets they may become certified with. The Control Evaluation and the Visit Evaluation are to be done by two different evaluators and may not be in the same family or household. Supervised visits may not occur at places of employment, or where you are regularly associated.
- ♥ All parts of the evaluation must be performed with your pet on a 4-foot leash. Tied, looped, stretchable, or retractable leashes are not permitted. If using anything longer than a 4-foot leash, the team must be sent home.
- ♥ ***Regardless of certification status, a team-in-training pet may not visit for more than one hour per day during a probationary (supervised visits) period.***
- ♥ All visits must be as a volunteer only. No form of payment may be received while on any visit.
- ♥ The Visit Evaluation form (p.13) must be completed by a certified Love on a Leash® team who supervised at least 5 of the required hours. It may not be completed until the conclusion of the required minimum of 10 supervised visit hours. ***The last visit must be supervised by the person signing the Visit Evaluation form.***
- ♥ ***The entire Membership Application must be completed and postmarked within one year from the date of the Control Evaluation.***
- ♥ ***At any time, including during National's application review process, a team-in-training may be asked to complete one or more additional supervised visits to ensure confidence that the team-in-training will be successful visiting independently.***

The section below is for additional visits, in case you are asked to do more than 10 visits.

Visit #	Date	Length	Full Facility Name (use back if needed)	Type of Facility or Activity	Supervisor's Name PRINT <u>and</u> SIGN	Progress Report (Give examples)



SUPERVISED VISITS LOG for Cats or Rabbits

Page 2 of 2



Pet's Name: _____ ☐ Cat ☐ Rabbit Breed: _____ Pet's DOB: _____

MM/DD/YYYY

Handler's Legal Name: _____ (or rescue date if DOB unknown; must be one year or older)

For First Supervisor:

Before signing the first supervised visit, you must check the Control Evaluation to be sure the date on the evaluation is within one year and the questions are all marked correctly. If they are, sign here. If not, do not sign, and send the team home. The handler is ineligible to visit.

X _____ X _____ X _____
(Supervisor Print Name) (Supervisor's Signature) (Control Evaluation Date)

Visit #	Date	Length	Full Facility Name (use back if needed)	Type of Facility or Activity	Supervisor's Name PRINT <u>and</u> SIGN	Progress Report (Give examples)
1	9/21/25	60 min	Mission Library / Carlsbad by the Sea (no acronyms please)	Reading with kids / Senior Living	Jane Smith <i>Jane Smith</i>	Great first visit / Pet seems shy or scared / Tail is flicking [cat] and pet does not appear to like visiting / Nice control of pet / Handler distracted easily, does not pay attention to pet / Pet snuggles well, etc.
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						



Visit Evaluator Guidelines for VISIT Evaluation for Cats or Rabbits

- ♥ This evaluation is to be filled out by a Visit Captain, or an experienced Love on a Leash® therapy member. If there are no Love on a Leash® teams in your area, an experienced facility employee (i.e. Recreational Therapist or Activities Director, etc.) may substitute as an evaluator who agrees to supervise you for a minimum of 10 visit hours. ***You must first contact Love on a Leash® by email to request pre-approval of a substitute supervisor at info@loveonaleash.org.*** A completed APPROVED substitute form must be included with your application packet for processing. Whenever possible, however, a team-in-training must pair up with a certified Love on a Leash® team for their supervised visits. ***If you do not seek pre-approval for a substitute, your application packet will be rejected.***
- ♥ All parts of the evaluation must be performed with the cat or rabbit on a 4-foot leash. Tied, looped, stretchable, or retractable leashes are not permitted. Additionally, no prong, pinch or electronic collars, of any kind, may be used.
- ♥ **NO treats, calming or anxiety meds, or other incentives** may be used during visits.
- ♥ Certified members may not evaluate/supervise their own pets, nor pets they share a home with, nor pets they may become certified with, as a candidate for certification. Family members may not evaluate/supervise another family member for certification.
- ♥ Hardware stores, pet stores, malls, fairs, festivals, social events, community walks, public events, or similar venues are not acceptable as supervised visits for teams-in-training.
- ♥ Supervised visits may not occur at the handler's place of employment or at places where they are regularly associated.
- ♥ If the cat or rabbit shows any aggression towards or injures any person or animal (including swiping or swatting), the visit must stop and an Incident Report must be filed with National Love on a Leash®.
- ♥ The recommended ratio of Love on a Leash® supervisors to teams-in-training is 1 supervisor per 1 team-in-training, or 1 supervisor per 2 teams-in-training (without the supervisor's pet present). Non-Love on a Leash® substitute supervisors may only supervise 1 team-in-training per hour.
- ♥ The Love on a Leash® Visit Evaluation is to assess the team and the amount of control the handler has in various situations. These guidelines are designed to provide the evaluator with objective criteria and to ensure consistency in the evaluation process across all parts of the country.

IMPORTANT! The Supervisor/Evaluator at the first supervised visit, must check the Control Evaluation to be sure the date of evaluation is within one year, and the questions are all marked correctly. If they are, then they can continue to fill out the first visit information on the Supervised Visits Log. The Supervisor/Evaluator who will sign the Visit Evaluation form must also follow this same procedure. This is to ensure that the Control Evaluation has been successfully completed and passed within the one-year time frame.

1. On how many visits have you observed this therapy team?

In order to sign the Visit Evaluation form, you must have observed the team for at least five (5) of the mandatory ten (10) hours, including their final visit. The Visit Evaluation form may not be signed until a minimum of 10 hours of supervised visits have been completed. The 5 minimum visits do not need to be consecutive, as long as the final visit has been with you. That way, you may officially complete and sign the team's Visit Evaluation form.



Additionally, if you do not feel this team is ready to be certified after 10 hours, you may request additional visits under your supervision. Currently, there are three additional blank lines on the Supervised Visit Log (p.7) for this purpose. You may ask the team-in-training for *more* than three additional visits, if needed. If asking for additional training or supervision, **do not sign** the Visit Evaluation until the team has completed any extra supervised visits and you are satisfied that the team is ready to be certified.

2. Does the cat or rabbit seem to like people and relate well to people?

Cats should look relaxed and have a happy demeanor. They should not be stiff or tense or aggressively flicking their tails. They should have 'soft' eyes that blink slowly and not be wide-eyed or alert which can denote fearfulness. Cats may sit down and tuck their paws underneath themselves as a sign of relaxation. They should not hiss, growl, swipe, swat, or spit. Relaxed and happy cats may purr.

Rabbits show their mood largely through the position of their ears. Relaxed rabbits have their ears straight up and close together, facing outward or forward. Ears that are back or pinned against the head may indicate anxiety. The rabbit's entire body language should also be monitored. Relaxed rabbits will lay down and look restful. Relaxed rabbits may sprawl out with their rear legs out to one side and their front feet bucked forward. Rabbits are also known to make sounds when they are happy. Purring or sighing are signs of a content rabbit. An agitated or fearful rabbit may ignore you, flick their feet at you, or be perched ready to hop away.

3. Is the cat or rabbit under control of the handler when it interacts with others?

As with our certified therapy dogs, both cats and rabbits must be on a 4-foot leash at all times when on a visit. They may use a harness or a collar that attaches the leash to the cat or rabbit. Handlers may carry their cats or rabbits in their arms. Some handlers use a pet stroller to carry and contain their therapy cat or rabbit while on a visit, in addition to the harness/collar and leash. Be sure the stroller is not too big or bulky – the location must be able to accommodate it. ***The handler should never be so engrossed in conversation that he/she does not know what their cat or rabbit is doing at all times.***

4. Is the handler able to get the pet close enough to people during visits?

It is a good idea to carry a lap blanket or towel for those who wish to hold their cat or rabbit, to protect against scratches should the animal become spooked. The handler should be right there with their pet and paying attention to them while conversing.

5. Is the handler able to initiate conversations with people & stimulate interest in their cat or rabbit?

It can be difficult at times to strike up a conversation with a complete stranger. However, while doing therapy work this will more than likely occur at each visit. Can the handler walk up to a person and talk to them? Does the handler attempt to converse with those who do not wish to speak or are unable to speak? Does the handler present their cat or rabbit in a positive and happy manner?

6. Does the handler relate well with people in general?

Does the handler enjoy talking to people and seem genuinely interested in those they are visiting? Does the handler check before approaching to ensure there are no allergy issues?

7. Based on your observations, do you feel this team is a good candidate for pet therapy at this time?

Considering all of these questions, does this team appear ready to be on their own without any further supervision? If you do not feel the team is ready, additional visits should be requested by you and under your supervision.



8. Would you like this cat or rabbit and its handler to continue visiting this facility?

This answer should be YES. If not, please mark NO on the Visit Evaluation and note the reason. The Visit Evaluation should not be signed off at this point. If extra visits may help, please request them. If not, let the team know you are not comfortable signing them off due to the issue(s) present.

9. Is there any behavior you would like them to work on that would not disqualify this team for therapy work?

Some examples could be, but are not limited to:

- ♥ The cat, rabbit, or handler is a bit shy and could use more training.
- ♥ The cat or rabbit is exhibiting concern, but is not reacting to types of hospital equipment such as wheelchairs or a walker, etc.
- ♥ The handler is still working on specific sound sensitivity issues.

Continue to next page for the VISIT EVALUATION form



VISIT EVALUATION for Cats or Rabbits

- ♥ **INSTRUCTIONS TO EVALUATOR:** This evaluation is to be filled out by a Visit Captain, Certified Love on a Leash® Member, or **pre-approved** substitute by National who has supervised the pet and handler on at least **five (5)** of the minimum **ten (10) supervised hour-long visits**, and is to be completed only **after** the minimum ten (10) supervised visit hours have been completed and documented on the Supervised Visits Log. **If a pre-approval for a substitute has not been requested, the application packet will be rejected.**
- ♥ Hardware stores, pet stores, malls, fairs, festivals, social events, community walks, public events, or similar venues are not acceptable as supervised visits for teams-in-training.
- ♥ ***NO treats, calming or anxiety meds, or other incentives may be offered to the pet during visits.***
- ♥ No more than one hour per day can be counted during the probationary (supervised visits) period.
- ♥ Candidates for membership cannot evaluate their own pets or pets they may become certified with, and may not occur at places of employment or at places where they are regularly associated.
- ♥ The Control Evaluation and the Visit Evaluation must be done by two different evaluators and may not be in the same family or household.

Pet's Name _____ Handler's Legal Name _____ Control Eval Date _____
Phone Number _____ Email _____
Handler's Address _____ City _____ State _____ Zip Code _____

I have checked the Control Evaluation to ensure the date of the evaluation is dated within one year, and the questions are all answered correctly as intended for a PASS. ☐ YES ☐ NO

1. On how many visits have you observed this therapy team? _____ Number of Visits = _____
2. Does the cat or rabbit seem to like and relate well to people?.....☐ YES ☐ NO
3. Is the pet under control of the handler when it interacts with others?.....☐ YES ☐ NO
4. Is the handler able to get the pet close enough to people during visits?.....☐ YES ☐ NO
5. Is the handler able to initiate conversations with people and stimulate interest in the pet?.....☐ YES ☐ NO
6. Does the handler relate well with people in general?.....☐ YES ☐ NO
7. Based on your observations, do you feel this pet is a good candidate for pet therapy?.....☐ YES ☐ NO
8. Would you like this pet and its handler to continue visiting this facility?.....☐ YES ☐ NO
9. Is there any behavior you would like them to work on that would not disqualify this team for therapy work?....☐ YES ☐ NO

Please explain: _____

PASS ☐ YES (**all** questions answered as intended)

RE-EVALUATE ☐ (Not ready at this time)

For Evaluator Only: If the team is not ready to be certified at this time (see #7, #8, #9), please understand that **only you** may re-evaluate this team. The team is responsible for sending in all completed forms when applying for membership. **Please print legibly.**

Name of Evaluator (Required) (*Please Print*) _____ LOAL ID# _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Signature of Evaluator: _____ Date of Evaluation: _____

Fill out completely. Incomplete Visit Evaluations will not be considered.



Membership Application for Cats or Rabbits

- ♥ Love on a Leash® can only insure evaluated partnerships (one person with one pet).
- ♥ Please fill out a separate application for each partnership.
- ♥ Each person wishing to certify with a pet must be 18 years old and must complete a Control Evaluation, a Supervised Visits Log, a Visit Evaluation, and a Membership Application.
- ♥ If more than one person is certifying with the same pet, each person must certify individually and may not combine hours or evaluations with another person.

1. Tell us about yourself (Please PRINT clearly):

☐ YES ☐ NO Are you presently, or have you ever been, certified with Love on a Leash®?

Legal Name: _____ Preferred Name: _____
(required) (e.g. Bill vs William)

Address: _____

City: _____ State: _____ Zip: _____

Phone (H): _____ Phone (C): _____

Email Address: _____ Chapter in your Area: _____

(Optional) In Case of Emergency, please list a phone number of an emergency contact: _____

☐ I confirm that I am at least 18 years of age.

Have you and/or your pet ever been involved with another therapy pet organization where your membership has been terminated, suspended, or revoked? _____

2. Tell us about your pet:

Call Name: _____ Pet type (cat or rabbit): _____

Breed: _____ Sex: ☐ M ☐ F Spayed or Neutered? ☐ YES ☐ NO

Date of birth (or rescue)(must be 1 yr or older): _____ (MM/DD/YYYY)

Weight (lbs): _____ Microchipped? ☐ YES ☐ NO # _____

Color and any distinct markings: _____

3. Declaration of Behavior:

Has your pet ever shown signs of aggression to other animals or people? ☐ YES ☐ NO
(If yes, please describe the circumstances on supplemental paper.)

4. Veterinarian Information: (Listed Veterinarian must have examined the pet in the past year and be able to vouch for the pet's health and current vaccinations)

Veterinarian: _____ Date of Last Exam: _____

Vet's Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Applications may take up to 4 weeks for processing.



Membership Application for Cats or Rabbits

5. (Choose One) Love on a Leash® BANDANA

All Welcome Packets include one Love on a Leash® BANDANA and one ½-inch wide 4-foot LEASH.
Use a soft fabric measuring tape to measure low and around the neck at the widest part.
Please select (X) your pet's bandana size.

Size	Neck
XXS	8" ~ 10"
XS	12" ~ 14"

6a. (Choose One) Certification FEE

- ☐ **New Therapy Pet Team** (Handler & Pet) \$100.00 \$ _____
(fee includes Handler Photo ID, Pet Photo ID, **Bandana**, ½-inch x 4-foot Leash, ID Holder & Love on a Leash® Certificate)
- ☐ **Current/Continuing Member Adding Additional Cat or Rabbit** \$80.00 \$ _____
**Member must complete Control Evaluation, Supervised Visits & Visit Evaluation forms with additional pet.*
(fee includes Handler Photo ID, Pet Photo ID, **Bandana**, ½-inch wide 4-foot Leash, ID Holder & Love on a Leash® Certificate)
- ☐ **Additional Handler** (For Cat or Rabbit Already Certified) \$30.00 \$ _____
**Additional Handler must complete Control Evaluation, Supervised Visits & Supervised Visits Evaluation forms with the pet's ID number*
(fee includes Handler photo ID, Pet Photo ID & ID Card Holder) **Cat or Rabbit ID #** _____

6b. (OPTIONAL) Additional Bandanas Available for Purchase

Extra Bandana(s): _____ **Bandana Size:** _____ **Quantity:** _____ x \$30.00 \$ _____
(NOTE: One bandana is already included with your new member packet.)

6c. (OPTIONAL) Donation (Thank you!) \$ _____

7. TOTAL Enclosed (Please make check payable to "Love on a Leash") \$ _____

♥ Applicant will be responsible for any service charges or fees incurred from a returned check. ♥

Questions? Call Love on a Leash® at (760) 740-2326
or email info@loveonaleash.org



8. Acknowledgement of Owner/Handler Agreement and Member Guidelines: *(Please complete, read and sign. Applications will not be accepted without this signed agreement.)*

Handler's Name: _____ Pet's Name: _____
(Please Print) (Please Print)

(INITIAL each) As the therapy pet's owner and handler, I understand and agree that:

- _____ I am responsible for all my pet's actions at all times, including but not limited to financial or physical injury.
- _____ I shall consider the safety of other people and pets at all times.
- _____ I shall continue my pet's education, refreshing obedience commands, and teaching special commands.
- _____ My pet and I shall be clean, neatly groomed, and healthy on each visit. My pet shall be parasite-free and up to date on all state required vaccinations.
- _____ I will remember at all times that my pet and its actions as well as my behavior, actions, and attitude represent all therapy teams in the eyes of the public.
- _____ I agree to abide by all of Love on a Leash® policies and procedures, including any revisions.
- _____ I understand that all therapy teams are volunteers. I understand that Love on a Leash® is not affiliated with any for profit entities. Therefore, Love on a Leash® trademarks or apparel may not be utilized during any activity that involves payment of any kind. If, as a handler of a therapy pet, I am at work or working in any capacity with my pet, then Love on a Leash® trademarks, IDs, and apparel must be removed from the pet and myself until our therapy team activity is clearly volunteer only.
- _____ If at any time my pet and/or I are no longer able to visit due to age, illness, disability or behavior problems, I will stop visiting and will notify Love on a Leash®. The Love on a Leash® Board of Directors reserves the right to make a determination on whether my pet and/or I are suitable to continue visiting.
- _____ I understand and agree that the Love on a Leash® Board of Directors has the complete discretion to disallow my pet or me to continue as a participating member.
- _____ I agree that if I do not or cannot abide by Love on a Leash® policies, procedures, and guidelines (including any revisions), my membership may be terminated at the discretion of the Love on a Leash® Board of Directors.
- _____ I give Love on a Leash® permission to use my photograph and the photograph of my pet for the purposes of education or promotion of Love on a Leash® and its programs.
- _____ ***I have read and agree to abide by the Owner/Handler Agreement.***
- _____ ***I have read the Membership Guidelines (available on the Love on a Leash® website).***

Signature: _____ Date: _____

Love on a Leash® is a not-for-profit, charitable organization. All officers and Board members are unpaid volunteers. Love on a Leash® does not rent office space. All funds are used to pay for direct operating expenses (insurance, member supplies, printing, postage, etc.).

Mail Completed Application To:

**Love on a Leash®
PO Box 4548
Oceanside, CA 92052-4548**

(Note: Please do not send by UPS or FedEx. They do not deliver to PO Boxes.)