



The Advocate for Animals  
SINCE 1867

## Guardian Surrender Future Care Program

### Enrollment Form

*This form should be submitted with a completed pet profile form and copy of your will or other estate planning document to the Pennsylvania SPCA. Please complete a separate enrollment form for each of your pets. Feel free to send a copy of all pertinent documents to the executor of your will, your attorney, any family or friends who can help ensure your wishes are carried out. Keep copies for yourself with your important papers. You can enroll online or download additional forms at [pspca.org/plannedgiving/GuardianSurrenderFutureCareProgram.html](http://pspca.org/plannedgiving/GuardianSurrenderFutureCareProgram.html)*

**I would like to enroll in The Pennsylvania SPCA's Guardian Surrender Future Care Program. In the event of my death, please inform the Pennsylvania SPCA to accept guardianship of my pet. I understand that PSPCA's standard intake criterion applies.**

Your name \_\_\_\_\_ Phone \_\_\_\_/\_\_\_\_ E-mail \_\_\_\_\_

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

#### Pet Identification

Pet's Name \_\_\_\_\_ Type of Animal \_\_\_\_\_ Breed \_\_\_\_\_

Sex \_\_F\_\_M Spayed/Neutered \_\_Yes\_\_No ID Tag? \_\_Yes\_\_No

Microchip \_\_Yes\_\_No Brand \_\_\_\_\_ Number \_\_\_\_\_ Tattoo \_\_Yes\_\_No

This is my only pet.  This is one of \_\_\_\_\_ pets in my family. **(Please complete one form for each pet)**

#### Executor of your will or Administrator of your retirement or insurance policy (if applicable)

Name \_\_\_\_\_ Phone \_\_\_\_/\_\_\_\_ E-mail \_\_\_\_\_

Company (if retirement or insurance beneficiary) \_\_\_\_\_

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

**In the event of my death, I have made arrangements with the Pennsylvania SPCA to care for my pets. Please contact them at once, as my pet (s) will need to be cared for immediately.**

Pennsylvania SPCA  
350 E. Erie Avenue  
Philadelphia, PA 19134  
Contact: Director of Planned Giving  
267-463-2317  
[pmecca@pspca.org](mailto:pmecca@pspca.org)

**Guardian Surrender Future Care Program Enrollment Form – Page 2**

I understand that the acceptance of my pet into the Pennsylvania SPCA's Guardian Surrender Future Care Program is contingent upon compliance with the program requirements, including, but not limited to, a bequest to the Pennsylvania SPCA in my estate plan with a minimum amount of \$2,500 per pet. I understand that if I have not complied with the program requirements that the Pennsylvania SPCA may refuse to accept my pet into the Guardian Surrender Future Care Program upon my death.

Furthermore, I do not object to humane euthanasia if it is in the best interest of my pet, if my pet has painful untreatable medical or behavioral problems, is extremely fragile or has severe anxiety and it may be very difficult to find a willing caretaker and/or if it becomes inhumane to make my pet endure the physical and psychological stress/trauma of shelter life or transitioning to a new home.

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date

**Please attach a picture of your pet**