

CABRA Membership Application Instructions

Complete both the Membership Application page and the Breed Rescue Profile page.

The Code of Ethics must be signed by both Delegates if a Family or Organization membership is desired; if you are applying for an Individual or Associate membership, only the applicant's signature is necessary on the Code of Ethics.

The application must be signed by two sponsors who are current CABRA members in good standing. The only exception is if your rescue is part of an organized breed club, in which case the signatures of two breed club officers can be substituted for those of CABRA member sponsors.

Please note: If you are applying to CABRA as a rescue for a breed currently represented by a CABRA member, you must have that current CABRA member's support. The current member's signature will be required as a sponsor on your application. If the current member holds an Organization or Family Membership, the signatures of both delegates are necessary.

Please submit the entire application to:

CABRA
P.O. Box 7264
Phoenix, AZ 85011-7264

Do not submit dues at this time. We will request a check for the appropriate amount when your application is approved.

If you have any questions concerning the application process, please contact Judy Dibbern at 602-234-2620 or 602-684-3158, or by email at judydobiesrus@msn.com. You may also contact Rebecca Kapp at 623-931-1428 or by email at arizonaweimaranerrescue@cox.net.

**COALITION of ALL BREED RESCUE of ARIZONA
(C.A.B.R.A)**

Membership Application

NAME (family/organization): _____

ADDRESS: _____ BREED 1: _____

CITY/STATE/ZIP: _____ BREED 2: _____

HOME PHONE: _____ WORK PHONE: _____

Email address: _____ Website address: _____

MEMBERSHIP OPTIONS

VOTING MEMBERSHIP

Eligibility – Only active rescues will be considered for voting membership status.

_____ \$20.00 **Individual**, a regular voting membership open to persons eighteen and older.

_____ \$35.00 **Family**, a regular membership open to families who pay family dues. Provides a maximum of two votes for members eighteen and older. Members under eighteen do not have voting rights and may not hold office, but have all other coalition privileges.

_____ \$35.00 **Organization**, a regular membership open to organizations (breed clubs) who pay organization dues. Provides a maximum of two votes for delegates or an alternate. (Please fill in delegate information below.)

NON-VOTING MEMBERSHIP

_____ \$10.00 **Associate**, a non-voting membership. May not hold office, but has all other coalition privileges.

DUES

Dues shall be payable on or before January 1st each year. No member may vote whose dues are not paid for the current year. Dues not paid by April 1st shall result in automatic cancellation of membership. A new application must then be submitted for membership.

CABRA SPONSORS

Sponsorship by two CABRA members in good standing is required.

Signature: _____ Breed: _____ Date: _____

Signature: _____ Breed: _____ Date: _____

DELEGATES (ORGANIZATION MEMBERSHIP)

Delegate #1: Name: _____

Address: _____

Delegate #2: Name: _____

Address: _____

Alternate: Name: _____

Address: _____

To change delegates or alternates will require a letter signed by two officers of the organization holding membership.

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Breed Rescue Profile

1. Do you have foster facilities? Y / N (circle one) Home kennel? Y / N
Commercial kennel? Y / N Private home fosters? Y / N
2. Can you provide temporary foster care for dogs of your breed or of similar size whose families are displaced by a disaster? (Referrals will come from Red Cross.) Y / N
3. Are you or your group affiliated with a breed club? Y / N if yes: Local? Y / N National? Y / N
4. Do you belong to any kennel clubs or animal groups? Y / N If so, which one(s)? _____

5. How long have you been involved in purebred rescue? _____
6. Approximately how many volunteers are actively involved in your rescue? _____
7. How many dogs did you rescue last year? _____
8. Do you use an owner's release for private turn-ins? Y / N
9. Do you have an application form for prospective adopters? Y / N
10. Do you have an adoption agreement? Y / N
11. Do you charge an adoption fee? Y / N
12. Do you sterilize dogs prior to adoption? Y / N If not, how do you enforce spay/neuter after adoption?

13. Do you require return of rescues if new owners cannot keep them? Y / N
14. Do you microchip your rescues prior to placement? Y / N
15. Do you euthanize dogs deemed unadoptable? Y / N
16. Do you accept rescues that are a cross with your breed? Y / N
17. Do you accept dogs that are not part of your breed? Y / N
18. Do you provide basic training (socializing, leash training) of rescues? Y / N
19. Do you provide potential adopters with printed information on your breed? Y / N
20. Do you follow up on rescues after adoption? Y / N
21. Do you require home inspections of your adopters prior to adoption? Y / N
22. Would you be willing to permit home inspections of your foster homes by CABRA directors? Y / N
23. Are you willing to attend a minimum of three CABRA events or meetings in a year? Y / N
24. Do you or others in your group perform other dog-related services, such as obedience training, grooming, pet therapy, boarding, tattooing, etc.? Y / N
25. Would you like this information made available to the rest of the coalition membership? Y / N
26. Are you or others in your group breeders? Y / N For conformation, obedience, herding, field trials, other _____ (please circle all that apply)
27. Are you interested in participating in any of the following activities? Y / N
If yes, please indicate which areas (please circle your interests):
Special Events Fundraising Education Microchip Clinics
Directory/Newsletter Telephone (hotline) Membership
28. Do you or any member of your group have other talents or areas of expertise that would be helpful and available to CABRA? _____

The information provided is complete and accurate. I agree to abide by the CABRA By-Laws and Code of Ethics.

Signed _____ Date _____

Signed _____ Date _____

**COALITION of ALL BREED RESCUE of ARIZONA
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Code of Ethics

As a member of CABRA, I agree to:

1. Not breed unregistered animals or animals that are registered through an unrecognized registry.
2. Not sell animals for profit to laboratories or retail organizations.
3. House and treat the animals in my possession in a humane and sanitary manner, free of parasites.
4. Enforceably require neutering or spaying of rescue animals.
5. Maintain and present my rescue animals in a clean and neat manner.
6. Disclose all known history of rescue animals (age, health, temperament and character) to the best of my ability.
7. Accept back into rescue any animal I have previously placed.
8. Provide and use a written adoption agreement on every adoption.
9. Provide for proper health care.

I have read and understand the above Code of Ethics. I further agree to not conduct or be involved in activities that may be deemed detrimental and/or contrary to the mission of the coalition. I understand these determinations will be at the discretion of the Board of Directors. I also swear I have not been convicted of cruelty to animals.

Signed: _____

Date: _____

Signed: _____

Date: _____