



# Oklahoma City Animal Welfare

## Transfer Partner Application

Name of Non-Profit (as shown on 501c3) \_\_\_\_\_

Address \_\_\_\_\_

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

Please list the current head of organization's name, email and phone number.

Please list the names and contact information for representatives of your organization that oversee your animal records and documentation.

Please list everyone that is approved to select and tag transfer animals for your organization.

What species, breeds, sizes, temperaments, medical conditions, and types of animals do you take in?

Who provides your veterinary services (Please list names and phone numbers)?

