I. STATEMENT OF RESCUE PROGRAM POLICY

The Basenji Club of America, Inc. (BCOA) is an American Kennel Club breed club and does not engage in hands-on rescue work. However, BCOA wishes to assist BCOA affiliated clubs and individual BCOA members engaged in private rescue efforts by providing limited financial assistance pursuant to the terms and conditions stated in this document. To that end, BCOA will take the following steps to establish a “safety net” rescue funding program:

A. BCOA will appoint a Rescue Liaison.
B. BCOA will establish and maintain a rescue fund. Money will be raised as needed via dues, donations, raffles, etc.
C. BCOA Rescue Liaison will research claims and gather appropriate information and will provide information with recommendations to the BCOA Board and Officers. The Board and Officers will determine when rescue funds will be disbursed under this Program. This determination will be made on a case-by-case basis. The “cap” amounts stated in this document are not guarantees that any specific amount will be paid with respect to a particular claim. Funding decisions will be based on the policy as written below and on the severity and prognosis of the medical conditions, anticipated adoptability of the dog, and the availability of funds.
D. BCOA will publish on its website and in its roster a list of rescue contact persons. The purpose of the rescue contacts list is to provide referrals to BCOA members who are available to provide local personal assistance to those in need of purebred Basenji rescue services.

1. Each BCOA affiliated club may supply (preferably in its annual renewal application) a list of BCOA members who would like to be included as rescue contacts.

2. Individual BCOA members in good standing who are active in rescue may request that the Rescue Liaison add their names and contact information to the above referenced website and roster lists under their state of residence and no more than two (2) additional, preferably contiguous states in which the individual member is active in rescue. Contact information is defined as an individual BCOA member’s personal phone number and e-mail address; corporate or other entity contact information will not be published.

3. BCOA rescue contacts agree to respond to requests for assistance in a timely manner.
II. **DUTIES OF BCOA RESCUE LIAISON**

A. Respond to all forms of correspondence related to rescue matters.
B. Receive applications for financial assistance, check references, and assign BCOA Rescue ID numbers to all new applicants.
C. Review, research, and forward funding requests with recommendations to the BCOA Board.
D. Check on status of all claims submitted, as needed.
E. Direct all parties to BCOA affiliated clubs or to individual BCOA members in their area for both adoptions and surrenders.
F. Organize rescue-related fundraising as needed (raffles, donation requests, etc.)
G. Present Rescue Liaison Report at the annual BCOA National meeting.
H. Mentor and assist BCOA affiliated clubs and individual BCOA members with respect to rescue related matters.

III. **BCOA RESCUE PROGRAM CLAIM PROCESS**

The BCOA will provide a limited “safety net” financial assistance to individual BCOA members or BCOA affiliated clubs caring for homeless purebred Basenjis. To be eligible for funding, individuals must be BCOA members in good standing. Groups of individuals acting together must consist solely of BCOA members or be a BCOA affiliate club in good standing. BCOA affiliated clubs do not need to consist solely of BCOA members.

A. **Eligibility and Application for BCOA Rescue Identification Number**

Before any financial assistance is provided to a BCOA member or BCOA affiliated club, each individual or club must be assigned a BCOA Rescue Identification Number (RIN). A completed Application for BCOA Rescue Identification Number (see attached) must be submitted to the Rescue Liaison. In addition, the following conditions must be met before a BCOA Rescue Identification Number will be issued:

1. Spay and neuter all Basenjis prior to placement;
2. Use written contracts with protective clauses for each adoption;
3. Have guidelines in place to ensure the safety of people and dogs;
4. Establish that the dogs are physically and emotionally fit before placement;
5. Maintain the Basenji in a well-kept facility or private residence;
6. Provide educational material and be available as resource to help the new family adjust to a Basenji;
7. Provide veterinary and adoption references upon request;
8. Be willing to give a public accounting for all donations.
B. Independent Incorporated Rescue Groups Ineligible
Independent, incorporated rescue groups are not eligible for a BCOA Rescue Identification Number and may not participate in the BCOA Rescue Program. However, BCOA may agree in extraordinary circumstances (as determined by the BCOA Board of Directors) to offer direct financial assistance or co-fund a rescue project with an independent, incorporated rescue group.

C. The Rescue Fund WILL Consider:
1. Emergency Medical Expenses: Cap $500.00 per dog.
2. Diagnostic Testing: Cap $300.00 per dog.
3. Extraordinary Expenses: Cap $300.00 per dog.
   These funds are for unanticipated additional expenses discovered during a routine examination or procedure on a rescued Basenji.
4. Spay/Neuter Assistance: Cap $100.00 per bitch, $75.00 per dog.
5. Insect/Tick Borne Diseases: Cap $300.00 per dog.
6. Emergency boarding: Cap $250.00 per dog.
7. Shelter Recovery: Cap $100.00 per dog. Services included in the shelter release fee such as spay/neuter, heartworm test, etc. will be considered in the caps listed above.

D. The Rescue Fund Will NOT Consider:
1. Routine medications such as wormers, heartworm preventative, thyroid supplements, etc.
2. Capital expenses such as the construction or renovation of kennels.
3. Incidental expenses such as bowls, buckets, food, leashes, etc.
4. Routine vaccinations.
5. Medical treatment of an individual’s personal pet.

E. Claim Requirements (must be submitted directly to Rescue Liaison)
1. The applicant must have or obtain a BCOA Rescue Identification Number.
2. The Claim Form (see attached) must be completed in its entirety.
3. Original bills, paid receipts and written estimates must be submitted.
4. Bills must be less than 90 days old.
5. A current photo of the dog must be provided.
6. In the case of an estimate, the estimate may be submitted and the Board will advise what charges would be covered.
7. Applicants must provide an assurance, in writing, that the dog will be spayed/neutered before final placement.
8. If an insect or tick-borne disease claim is submitted, the results of the test must accompany the application.
F. Claim Payment Protocol

1. All claims must be submitted to the BCOA Rescue Liaison.

2. After receipt of the claim, the following steps will occur:
   a. The group or individual will be notified that the claim has been received;
   b. The Rescue Liaison will check the application for completeness and will research the claim as needed;
   c. The Rescue Liaison will forward the claim to the BCOA Board of Directors with recommendations. The Board reserves the authority to deny any claim in whole or in part;
   d. If the claim is approved, the submitting BCOA affiliated club or BCOA member will be contacted and a check will be mailed to the claimant by the BCOA Treasurer within 35 days of receipt of the claim;
   e. If the claim is denied in whole or in part, the submitting BCOA affiliated club or BCOA member will be contacted in writing (via e-mail or regular mail) by the BCOA Rescue Liaison within 35 days of receipt of the claim.

3. The Basenjis subject to the Kansas City, MO Foster and Adoption Agreements are not subject to the terms of this Basenji Club of America Rescue Program. Reimbursement of appropriate expenses for those Basenjis is controlled by the terms and conditions of the above referenced Kansas City Foster and Adoption Agreements.
APPLICATION for BCOA RESCUE IDENTIFICATION NUMBER

It is the desire of the Board of Directors of the Basenji Club of America, Inc. (BCOA) and its members to provide “safety net” financial assistance to those who rescue homeless purebred Basenjis. Any BCOA member or BCOA affiliated club that is caring for a rescued Basenji may obtain assistance pursuant to the terms of the Program. Before submitting an initial claim, BCOA members and BCOA affiliated clubs must obtain a BCOA Rescue Identification Number as detailed below.

In order to apply for funds using a BCOA Rescue ID number, each BCOA member or BCOA affiliate club must be prepared to demonstrate financial need. The final determination of whether actual financial need exists is within the discretion of the BCOA Board of Directors.

Name of BCOA Affiliated Club or Individual
______________________________________________________________

Contact Name ____________________________ Phone ____________________________
Address __________________________________ City ____________________________
State ___________ Zip ___________ E-Mail ____________________________

If you are an organization, are you incorporated as non-profit? ______________

501(c)(3)? ______________

How many years of experience do you or the members of your organization have with the Basenji breed? ____________________________

Approximately how many Basenjis needing placement do you have under your care at any one time? ____________________________

Approximately how many rescued Basenjis do you place annually? ______________

If you are not a recognized rescue group, please provide two references including name and contact number or e-mail who can verify your dog-related experience.
______________________________________________________________
______________________________________________________________

Do you or your organization have any objection to being listed as Basenji rescue contact on a BCOA web page? ______________
Please describe your policies and procedures:

Do you have an adoption application and pre-adoption screening procedure? Yes / No

Do you have an adoption contract? Yes / No

Do you provide educational and health information emphasizing the positive and negative traits of the Basenji breed? Yes / No

Do you evaluate the temperament of the Basenjis prior to considering it adoptable? Yes / No

Will you humanely euthanize any dog found to be unadoptable because of severe and uncorrectable medical conditions, extreme aggressiveness, and/or temperament that exhibits a threat to humans? Yes / No

Does the Basenji receive pre-adoption veterinary care including but not limited to spay/neuter, heartworm check, fecal check, and current vaccinations? Yes / No

If the adoptable Basenji is a puppy, do you have a spay/neuter clause in your adoption contract and follow-up to insure that this Basenji is altered? Yes / No

Do you have a “return” or “take back” clause in your adoption contract? Yes / No

Do you or your organization have an internet web site to list adoptable Basenjis and provide public education? URL ____________________________________________

Do you, the undersigned, understand that any misrepresentation of yourself, or your organization or any untruths in the information which you have provided herein that are discovered will invalidate this application and exclude you or your organization from participation in the BCOA Rescue Fund? Yes / No

Additional Comments ____________________________________________

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Signature of Representative ____________________________ Date __________
APPLICATION FOR BCOA RESCUE FUND ASSISTANCE

It is the desire of the Board of Directors of the Basenji Club of America, Inc. (BCOA) and its members to provide “safety net” financial assistance to abused, abandoned, neglected, and homeless purebred Basenjis. Any BCOA member who is caring for a rescue dog may apply.

Please provide the following paperwork when submitting your claim to the Rescue Liaison:

- Photo of the Basenji (can be e-mailed)
- Statement of Need
- Veterinary Bill(s)
- Veterinary Statement
- Receipts for reimbursement of paid bills (specific charges highlighted)
- Any other receipts for treatment/medications used
- Any test results pertinent to treatment (positive heart worm test, etc.)

Name: ___________________________________________ Date: ______________
Address __________________________________________ City __________________ State _____
Zip ______ Phone ______________ E-Mail _________________________________
Basenji’s Name ______________________ Age ________ Sex ______
Is this Basenji under your direct care? Yes / No Boarding Kennel? Yes / No
Shelter? Yes / No UTD on Vaccines Yes / No Heartworm Negative: Yes / No
Fecal Negative? Yes / No Temperament Evaluated? Yes / No
Spayed/neutered? Yes / No If No, why? ________________________________

Please describe your need for financial assistance: __________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
If boarding claim, please provide Name, Address, & Phone Number of Facility:________
________________________________________________________________________

Total Amount Requested:____________________________________________________

Signature of Applicant:_________________________________________________________________

Submit to:
BCOA Rescue Liaison
[address located in BCOA roster and website]

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For BCOA Rescue Liaison purposes only:

Date Received__________________________

Date Submitted to BCOA Board_______________________ Approved / Disapproved

Amount Approved: __________________________ Applicant Notification Date:_________

Veterinary Statement
Must be signed by attending veterinarian if claim is for veterinary care or services

Name of Veterinary Hospital ____________________________________________

Phone Number___________________________ E-Mail ______________________

Address ______________________________ City __________________________

State ____________ Zip ____________ Attending Veterinarian ______________________

Dog’s Name _______________________________________________

Findings of Exam ____________________________________________

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Prognosis with treatment____________________________________________________

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Comments/Suggestions_____________________________________________________

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Attending Veterinarian’s Signature___________________________________________

Date ___________________________