

Currently, we are visiting residents in nursing homes and rehabilitation hospitals located in:

Berkeley Heights
Cedar Grove
Chester
Clark
Edison
Fairfield
Flemington
Greenbrook

Lawrenceville
Mendham
Passaic
Plainfield
Princeton
Scotch Plains
Toms River
West Milford

TheraPet, Incsm

P O Box 787, Clark, New Jersey 07066-0787



(732) 602-1112

www.therapet-inc.com

[E-mail to info@therapet-inc.com](mailto:info@therapet-inc.com)

TheraPet's list of facilities is always growing



In addition to visiting facilities, the benefits of membership in TheraPet include:

1. Monthly meetings in Central New Jersey where you and your pet can receive training, listen to interesting speakers, share social interaction and become a part of a meaningful organization.
2. Participation in local activities such as holiday parades, and annual pet show, pet fairs, etc. (not mandatory, but as your time and interest allow).
3. Insurance that protects you, your pet, and the residents for any accidents or injuries that may occur during or a result of an TheraPet activity



For further information on
(732) 602-1112
Check out our website
www.therapet-inc.com

e-mail at info@therapet-inc.com

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P.O. Box 787
Clark, NJ
07066-0787

The mission of TheraPet is to promote and perform animal assisted activities in a variety of settings in an effort to provide comfort, companionship and positive interactions. To that end, TheraPet recruits, screens, trains, and orients volunteers and their animals.

Who we are

Therapet, Inc. is a non profit organization established in New Jersey and made up entirely of volunteers. We take our pets (primarily dogs and cats) into nursing homes and rehabilitation hospitals to visit with residents and perform animal-assisted activities. We also work to promote the valuable bond between people and animals in a therapeutic setting.

The benefits of what we do

Often the acts of petting or brushing an animal or a simple game of fetch can create positive physical, mental, and/or emotional reactions in the residents. Pets are used to stimulate conversation, encourage activities, stir memory function, and invite interaction, provide physical and occupational therapy, and develop improved speech.

In addition, you and your pet benefit from the social interaction, the reward of giving something back to your community, the training techniques we share, and the time you and your pet spend together.

Who should join us

TheraPet is open to anyone who supports our Mission Statement and wants to give something back to his or her community.

We are looking for pets and owners who are calm, friendly, and like to meet new people. The pets should like being touched by strangers and be healthy, pest-free, tolerant of new sights, smells and distractions, and under the control of their owners. Pets do need basic obedience and will be on a leash at all times while visiting. We ask for a commitment of two visits a month for 10 months a year.

How you can join us

Enclosed in this brochure is a one-page application for you to complete. [We have also provided a page describing our application, orientation, screening, and training process.] [You may wish to keep a photocopy of this so you have it after you send the application.] Screening is done three times a year at our meeting location in Central New Jersey in February, June, and October.

Lastly, we have included a two-sided form for you to take or send to your veterinarian. He/she should complete and return this to us as soon as possible. **We cannot begin your orientation until we receive this paperwork.**

What is expected of a volunteer?

TheraPet Volunteers should be prepared to:

- Abide by all TheraPet rules and regulations while visiting or participating in a TheraPet activity.
- Abide by the rules or recommendations of your facility.
- Maintain control over our pet at all times while visiting or participating in a TheraPet activity.
- Your pet should be well groomed and pest control should be done at least 24 hours before visit.
- Dress and act appropriately while visiting or participating in a TheraPet activity.
- Be consistent in your visits and communicate with your Facility Coordinator if you cannot keep an appointment.
- Be sensitive, respectful, and courteous to all residents, family members, and facility staff.
- Be prepared to listen to the residents and answer any questions over and over.
- Maintain a positive attitude while visiting and make no promises you are not able or qualified to keep.
- Be aware of your pet at all times, recognizing stress, unsafe situations, and the reactions of residents, family, and staff.
- Use equipment designated by TheraPet during your visit.
- Support your organization and communicate with appropriate members/officers/committees if you have a question or problem.

While you may not be aware of it, your presence and your pet's visit are immensely appreciated and the residents look forward to your return.

We must receive you completed applications (with check, medical form and attachments) by the first day of the month in which you will be screened.

MEDICAL EVALUATION FORM

(Please complete an separate form for each pet)

Owners name and address			
Pets Name	Age	Sex	Neutered?
Veterinary Clinic		Telephone	
Address			
Hs this pet ever had		Date of last exam	
a staphylococcus infection which was resistant to multiple antibiotics?	Yes	No	
Nematode infestation which could cause larva migrans?	Yes	No	
Problems with external parasites? If yes are they currently under control?	Yes	No	
Contagious dermatitis? If yes, has successful treatment been complete?	Yes	No	
For dogs , has this pet maintained vaccinations against distemper, hepatitis, leptospirosis, parainfluenza, Parvovirus, and rabies?	Yes	No	
For Cats , has this pet been inoculated annually against pneumonitis, panleukopenia, rhinotracheitis, calcivirus , and rabies?	Yes	No	
To your knowledge has this pet bitten anyone?	Yes	No	
Additional Comments:			
This record will be kept on file at TheraPet and will be available only to the owner, his/her veterinarian, and authorized TheraPet personnel. a copy of the vaccination record will be kept on file at the facility.			
Signature		Date	

Application Instructions

Detach the medical evaluation form on this page and send or take it to your veterinarian. He /she should complete the evaluations of your pet's medical records and return it to us promptly. Your vet should attach **two** copies of your pet's vaccination records; one copy will be kept in a confidential file at TheraPet, and the other is required to be filed at the facility you will visit.

In the meantime, you should complete the application on the other side of this page and return it to us with a check made out to TheraPet, Inc. for \$25.00, **which is a non-refundable screening fee**. If your pet is a dog please **attach two copies of your license** If your town requires **cat licenses**, you must provide **two copies** of that license. All animals need shot records. **Two Copies**

The completed application (with check and attachments) should be received by the first day of the month in which you will be screened.....

A representative of TheraPet will send you a letter with screening appointment for the fourth Monday of February, June, or October. If you are unable to keep the appointment for some reason, please be sure to call us. **Otherwise, you will have to reapply and pay another screening fee.**

In addition, the facility Coordinator for the facility you will be visiting will call you to schedule your first orientation visit. On that visit, you will leave your pet at home and accompany the Building coordinator and his/her pet on a normal visit to the facility. This first visit should occur **before** your screening appointment. If you have any questions, please call **(732) 602-1112**.

Once you have successfully passed the screening you and your facility Coordinator will schedule orientation visits. You will bring your pet on these visits. The number of visits will probably be three; however, your facility Coordinator may, at his/her discretion, request additional visit until you, your pet, and your facility Coordinator are comfortable.

The final step to orientation is to attend a training meeting, Scheduled for the fourth Monday of March, July, and November (the month immediately following screening). In a fun and informative group session, new and existing TheraPet members will share experiences, tips and Ideas, and training techniques. You will receive a TheraPet Training Manual to take home, to reinforce the techniques you have learned.

Please be aware that TheraPet reserves the right to re-evaluate any pet medically and /or temperamentally if a circumstance or concern should arise.

Application

**Mail to TheraPet, Inc. P. O. Box 787, Clark, NJ 07066
Along with a Non- Refundable screening fee of \$25.00**

Please print

Name		Telephone		
Address				
Pet Name		Breed		
Age	sex	Neutered	Yes	No
Veterinarian		Telephone		
Address				
Why do you wish to be a pet visitation volunteer?				
Describe your pet's temperament/personality and training.				
Does your pet exhibit any aversion to being touched in an particular spot?				
Has your pet ever bitten anyone?		Yes	No	
<p>I certify that the following have been explained to my satisfaction and I hereby agree, upon acceptance as a member, to:</p> <ul style="list-style-type: none"> • Abide by TheraPet's rules and regulations for the safety of myself, My pet (s) and the residents I will be visiting • Comply with the screening and training requirements of TheraPet and complete all aspects. • To the best of my ability, make a minimum of two visits per month for a period of 10 months of each year. • Hold TheraPet, Inc., it's officers and members harmless for any accidents, illnesses, etc. to myself or my pet (s) that may occur during or as a result of an TheraPet function 				
signature			date	

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P O Box 787
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Dear Doctor;

TheraPet, Inc., is an all-volunteer organization of pet owners who visit residents in nursing homes and rehabilitation hospitals with their pets. The pet before you has been nominated to participated and we need you to help in evaluating the animal. The pets used in our program must be physically and mentally sound and current on all required immunizations.

We request that you complete this evaluation form and return it to us as soon as possible.

We welcome and encourage you to call us at (732) 602-1112 if you have any questions, or to recommend any of your clients whose pets might be suitable.

Thank you for your time.

Please attach **two (2) copies** of the pet's vaccination record and return this form to

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