



## FOSTER HOME APPLICATION

Name:

Address:

City:

State:

Zip:

Home Phone:

Cell Phone:

Email:

Occupation and Employer:

Please tell us why you are interested in fostering:

Have you fostered dogs in the past? Y N

If yes, list rescue name and telephone number:

The type of dog I would be interested in fostering would be: (size restrictions, gender, temperament, age etc.)

Do you live in a: Home Condo Apartment Other

Do you: Own Rent (provide landlord name and phone #)

How long have you lived here? \_\_\_\_\_

Describe your yard including fencing height and type:

How many adults in your home? \_\_\_\_\_

Children: \_\_\_\_\_ Ages of children: \_\_\_\_\_



Do you own any other pets? Y N

Please list pets including species, size, age, and sex:

Are all dogs up to date with all vaccinations? Yes No

(must be "Y", we must verify to qualify for fostering, please call your vet to give us permission to inquire about your pets)

Please provide Vet Name and Phone Number: \_\_\_\_\_  
\_\_\_\_\_

How many hours will the foster dog(s) be alone each day? \_\_\_\_\_

Where will the dog be kept most of the day?

Where will the dog(s) sleep?

I, \_\_\_\_\_, agree to the following:

To keep the foster dog always contained safely on a leash when outside.

To bring any medical issues to the attention of the President immediately.

To treat and care for any foster dog as a member of your family for this short period of time.

To transport the foster dog to arranged meetings with potential adopters.

Signature \_\_\_\_\_ Date \_\_\_\_\_

THANK YOU FOR HELPING TO SAVE A LIFE!!!