



For Office Use Only:

FOSTER CARE APPLICATION

In order to help establish a positive experience for both you and your future foster, please fill out the following information **in print** and answer all questions to the best of your abilities:

First and Last Name: _____

Street Address: _____

City, State, Zip: _____

Cell Phone: _____

Alternate Number: _____

E-mail Address: _____

1. Type(s) of animals you are interested in fostering? Mark all that apply:

- Nursing Cats (Mom & Litter) Kittens Only
- Nursing Dogs (Mom & Litter) Puppies Only
- Adult Dog/Puppy Socialization Adult Cat/Kitten Socialization
- Medical Special Event Other - Specify: _____

If interested in fostering dogs, please specify size: _____

2. Have you fostered animals before? No Yes
If so, where? _____ What species/age group? _____

3. List any experience have you had with animals that would be helpful in fostering:

4. Do you live in a(n): Apartment Condo House

5. If interested in fostering an adult dog, do you have a fenced yard? No Yes Fence Height: _____

6. Are there any children in your household? No Yes If yes, number of children: _____
Ages: _____

7. Do any members of your household have animal related allergies? No Yes
If so, to what species: _____
8. Do you have any pets in your household now? No Yes
- A. What kind of pets do you have? _____
If cat(s), they are kept: Indoors Outdoors Both
- B. Do your pets get along with other animals? No Yes
- C. Are all your pets spayed or neutered? No Yes
- D. How old are your pets? _____
- E. Are your pets' vaccinations up-to-date? No Yes
Please provide name and number of shot clinic who provided current vaccines:
_____ **Vaccines Verified:** _____
- F. Will you be able to keep foster animals separate from your own if and when necessary?
 No Yes
9. Where in your home do you plan to keep your foster animals? _____
10. Number of hours a day your foster animal(s) will be unsupervised: _____
11. What will you do if your foster animal becomes lost? _____
12. Are you willing to accept the fact some animals in your care will not survive due to multiple reasons or may require humane euthanasia for various reasons and that this decision is at the sole discretion of The Animal Foundation staff? No Yes
13. Do you understand that anyone interested in adopting your foster animals (*including you*) must go through the standard adoption process, and the approval of candidates or placement of animals is up to The Animal Foundation Staff?
(*Of course, we welcome your referrals!*) No Yes

I have answered the questions above truthfully and completely. I understand that although The Animal Foundation takes reasonable care to screen animals for foster care placement, it makes no guarantee relating to the health of an animal, behavior, or actions. I understand that I receive foster care animals at my own risk and can reject or return any animals for which The Animal Foundation has asked me to provide care. I indemnify and hold The Animal Foundation free and harmless from all liability arising out of any and all claims, demands, losses, damages, action, judgment of any and all kind and description which may occur to or be suffered by me, members of my household, or any third parties by reason of activities arising out of this agreement.

Print Name: _____

Signature: _____ **Date:** _____

Foster Coordinator: _____ **Date:** _____

FOSTER PARENT AGREEMENT & REQUIREMENTS

Monthly foster orientations communicate the responsibilities of foster parents. You will be required to attend a foster orientation before becoming a foster parent. This Foster Parent Agreement will clarify the expectations of the program. This will improve the quality and success of our foster program, in addition to the wellbeing of our foster animals. The Animal Foundation is a proud sponsor of this foster care program. By joining, you are asked to comply with the policies of the shelter and the expectations of the program. Please read and initial the following:

_____ I understand foster animals are the property of The Animal Foundation and I am not to keep my foster animals past the indicated foster period, unless told otherwise by the Foster Coordinator or TAF staff.

_____ I understand I must keep my foster animal in my home and in my care for the duration of the foster period.

_____ I understand I cannot foster more than two different litters at a time.

_____ I understand the Foster Coordinator will contact me when a foster animal is available for foster.

_____ I agree to get my foster(s) to their vaccine and check-up appointments on schedule as required. I understand all appointments must be pre-scheduled through the Foster Coordinator.

_____ I understand I need pre-approval and pre-scheduling through the Foster Coordinator for vet visits with shelter vets. I further understand if I so choose to take my foster to a veterinarian other than the shelter vets, any and all expenses incurred at the veterinary clinic **will not** be reimbursed by the shelter.

_____ I will never let a cat or kitten outdoors. I will prevent all possible escape routes.

_____ I will never let a puppy who is not fully vaccinated outdoors.

_____ I will not allow my young children unsupervised access to foster pets.

_____ I will never allow an unrestrained dog near my foster cats or kittens.

_____ I agree to make every effort to answer any phone call or e-mail sent to me by the Foster Coordinator or TAF Staff within 24 hours.

_____ I agree to and understand I **must** keep my foster pets quarantined from my resident pets at all times while in my care to minimize health risks. I understand the shelter is not responsible for illness occurring in a foster parent's pet or the veterinary care it may require. I further understand kennel cough in dogs and upper respiratory in cats are very contagious and my pets are at risk even if properly vaccinated.

_____ To ensure a smooth, stress free transition, I agree to always coordinate an animal's return to the shelter with the Foster Coordinator.

_____ I will report any change in my foster animal to the Foster Coordinator. This includes, but is not limited to: extreme lethargy, loss of appetite, difficulty breathing, green nasal secretions, lack of weight gain, open mouth breathing, sudden behavior changes, etc.; death or escape of your foster animal; Interest in adoption of my foster animal.

_____ I have received the foster contact numbers so I know whom to contact with fostering questions.

_____ I understand I will receive a Foster Care Manual and that I must RSVP with the Foster Coordinator to attend a foster orientation meeting and I must attend this meeting before becoming a foster parent.

_____ I understand I am opening my home to shelter animals and there is always a risk of scratches, bites, or other potential harm to any resident (human or animal) by a foster animal whether intentional or unintentional, directly or indirectly. I further understand The Animal Foundation is not held liable for any injuries incurred by or having to do with the care of a foster pet. I also understand that if my foster animal bites anyone while in my care I will immediately report the incident to the Foster Coordinator.

_____ I understand that continued participation in the foster program depends on my complete cooperation with all TAF staff and my adhering to TAF foster agreement, guidelines, and procedures. If I violate any agreements, guidelines, or procedures and/or do not properly cooperate with TAF staff, I will be asked to resign as a foster parent and will immediately return all foster pets in my care.

ADOPTION RESPONSIBILITIES

_____ I understand that once my foster animal is the proper weight and/or healthy, I am expected to return it to the shelter so it may be adopted into its forever home.

_____ I understand no foster animal is to be adopted out, or kept as my own pet, until the official adoption paperwork is complete AND spay/neuter surgery is done.

_____ I am aware that screening is done on all potential adopters and that they must meet certain criteria before adopting. For this reason, foster animals cannot be promised to family or friends unless and until they go through the usual shelter adoption screening process.

_____ The Animal Foundation (TAF) reserves the right to refuse adoption of any animal.

_____ By policy, no person under 18 years of age is allowed to sign the adoption contract or agreement.

Print Name: _____

Signature: _____ **Date:** _____

Foster Coordinator: _____ **Date:** _____