



FOSTER APPLICATION

Name: _____

Phone Number: _____

2nd Phone Number: _____

Physical Address:

Street: _____

City: _____ State: _____ Zip: _____

Preferred method of contact (circle one): PHONE EMAIL

Email: _____

By signing here, you acknowledge that you were provided a copy of our Animal Bite Protocol and our Foster Animal Liability Release and Foster Agreement and will read and abide by the information provided on each.

Foster Signature (must be 18 years of age):

X _____ **Date:** _____

Staff USE ONLY:

Conversation Questions (please circle one)

1. Do you have children in the home? YES NO
2. Ages? UNDER 10 OVER 10
3. Other Pets? SMALL DOGS LARGE DOGS CATS
 MALE DOG FEMALE DOG
4. Where will foster dog be kept? INSIDE OUTSIDE IN
 FENCE

STAFF: Dogs may not run loose!

5. Where will foster cat be kept? INSIDE OUTSIDE

STAFF: Cats must be kept inside!

STAFF USE ONLY

Entered into foster by: _____ **DATE:** _____