



ANIMALSAVE FOSTER APPLICATION

Fostering is a major responsibility, and one that should not be taken lightly. In AnimalSave's ongoing effort to find the best possible foster home and eventually adoptive home for all of its animals, we ask that you take time to fill out this application and discuss any questions you have with our adoption coordinator or foster coordinators.

In order to be considered for fostering for AnimalSave, you must:

1. Be an AnimalSave Volunteer
2. Be at least 18 years of age
3. Be able to verify that you can have a pet where you live
4. Be able to make at least a 6 month commitment

Please understand that AnimalSave reserves the right to deny fostering any pet for any reason as determined by the Adoption Program.

Interested in: Cat(s)_____ Kitten(s)_____ Other_____

 Dog(s)_____ Puppy(ies)_____

Gender Male_____ Female_____ Doesn't matter_____

Name _____ Home Phone _____

Address _____ Work Phone _____

City _____ State _____ Zip _____

E-mail Address: _____

How long have you lived at this address? _____

(Please Circle one) Do you live in a: House Apt. Condo Other

(Please circle one) Do you: Own Rent Lease Other

Landlord's Name _____ Phone _____

Why do you wish to foster animals for AnimalSave? _____

Current Pets: Please include all pets, including small caged and barnyard animals:

Type of Pet Age Sex Spay/Neutered? Kept In/Out? How Long Owned?

Will the AnimalSave animal(s) be isolated? _____ Or with others? _____

Where will AnimalSave animal stay during the day? _____ At night? _____

How many hours of the day will the animal be alone? _____

If you have cats, please indicate the date of their last vaccination for the following diseases:

Rabies _____ FVRCP _____ FELV _____

If you have dogs, please indicate the date of their last vaccination for the following diseases:

Rabies _____ DHLPP _____

Name and phone number of the veterinarian you currently use _____

Do you have transportation to bring this animal to a temporary adoption center on weekends?

_____ Yes _____ No To the veterinarian if necessary? _____ Yes _____ No

Do you have a yard? _____ Yes _____ No If so, is it _____ Open? _____ Fully enclosed?

Type of Fence _____ Height _____ Size _____ Dog run? _____ Yes _____ No

Do you have a pool? _____ Yes _____ No Deck Size _____ Kennel _____ Other _____

Number of children living in your home:

Under 6 years _____; Under 13 years _____; Teens _____

Are there other adults at home? _____

What kind of arrangements are you willing to make if you need to go away for a few days? _____

Do you object to an initial visit to your home prior to fostering this animal? _____ Yes _____ No

Please note any additional information which will assist us in finding the proper foster pet for you.

AS AN ANIMALSAVE FOSTER, I AM RESPONSIBLE FOR THE CARE OF THIS ANIMAL.

Signature _____ Date _____

Name (please print) _____ Phone _____

Address _____ City _____ Zip _____

FOR OFFICE USE ONLY:

Date _____

FOLLOW UP CALL:

DATE: _____ REMARKS:

