



## Foster Home Program Application

Completing this application does not put the applicant under any obligation and does not guarantee that the applicant will receive a dog/cat to foster. All information is kept strictly confidential. Please complete the application in full. By submitting this application, the applicant states that all information is true and accurate.

### **ABOUT YOU**

Names of all adults in household: \_\_\_\_\_

Address: \_\_\_\_\_

City, Province, Postal Code: \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Best time to call \_\_\_\_\_

Email \_\_\_\_\_ FAX \_\_\_\_\_

Occupation: \_\_\_\_\_

Number of persons in your household? \_\_\_\_\_

Adults: \_\_\_\_\_ Children: Ages: \_\_\_\_\_

Who would be the animal's primary caregiver? \_\_\_\_\_

Is anyone in your home allergic to animals? \_\_\_\_\_

### **ABOUT YOUR HOME**

What type of dwelling do you have? (Circle one)

Apartment, Condominium, Detached Home, Duplex, Townhouse, Farm, Rural Property

Other \_\_\_\_\_

Do you OWN or RENT your home? (Please circle one)



If you rent your home, do you have your landlord's permission to keep a dog? Yes No

How long have you lived at this \_\_\_\_\_

Do you have a yard? Yes No

If you have a yard, is it fenced? Yes No

If your yard is not fenced, how do you plan to ensure that the dog receives safe and adequate \_\_\_\_\_

Where will the dog spend the day? \_\_\_\_\_

How many hours a day will the dog be left alone? \_\_\_\_\_

Where will the dog be kept when left alone? \_\_\_\_\_

Where will the dog sleep \_\_\_\_\_

Would you be willing to crate the dog while unsupervised? Yes No

Are there currently animals in your home? Yes No

If yes, please list them, including Type (dog, cat, bird, etc), Gender, Spayed/Neutered, Breed, Age: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## **PET OWNERSHIP QUESTIONS**

Have you ever bred or raised dogs/cats? Yes No

Do you have experience training dogs/cats? Yes No

Have you ever owned a dog/cat before? Yes No

Why do you want to foster a dog/cat?

How often do you go on holidays or take vacations where you would not be able to take the foster dog/cat? \_\_\_\_\_

\_\_\_\_\_



Would you be willing to foster an animal with behavioural issues? \_\_\_\_\_

## **FOSTER PREFERENCES**

Age preference: Young adult \_\_\_\_\_ Mature adult \_\_\_\_\_ Senior \_\_\_\_\_ No preference \_\_\_\_\_

Desired activity level: Active \_\_\_\_\_ Medium \_\_\_\_\_ Couch potato \_\_\_\_\_

Would you be willing to housetrain a dog/cat? Yes No

For what length of time would you be willing to foster a dog/cat? (Check all that apply)

- Emergency fostering (on a short notice)
- Short-term fostering (days to several weeks)
- Long- term fostering (weeks to months, or until a permanent home is found)



## REFERENCES

Please provide the names and contact information for two references who can speak to your fitness as a pet owner in general. Please inform your references that we may be contacting them and give them permission to speak with us. If you currently own or have in the last five years owned a pet, please include your veterinarian as one of the references. PLEASE DO NOT LIST MORE THAN ONE FAMILY MEMBER OR OTHER RELATION AS A REFERENCE.

### **Reference 1:**

Relationship to you: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City Province Postal Code: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Best time to call: \_\_\_\_\_

### **Reference 2:**

Relationship to you: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City Province Postal Code: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Best time to call: \_\_\_\_\_

**OTHER COMMENTS:** \_\_\_\_\_

\_\_\_\_\_



## **INDEMNIFICATION AGREEMENT:**

The undersigned Applicant(s) hereby agree to release, indemnify and covenant to hold harmless, New Hope Animal Rescue, its members and officers, and its successors and assigns, from any claims, damages, injuries, costs, or actions incurred as a result of fostering any animal from New Hope Animal Rescue.

APPLICANT SIGNATURE: \_\_\_\_\_

APPLICANT NAME (please print) \_\_\_\_\_

DATE: \_\_\_\_\_

Thank you for your interest in fostering a rescue dog/cat from New Hope Animal Rescue. Please be advised that a home visit will be required before your application can be approved. If you have any questions, please contact a New Hope Animal Rescue representative.