



Date: _____

FOSTER CARE APPLICATION

We appreciate the invaluable service that foster parents provide. We want to make the most informed decision regarding which animals to place in your care. Completing this application is the best way to assure a positive experience for both you and the animals. Please understand that completing this application is not a guarantee that we will have the right animal to place in your foster home.

Name:		
Address:		
Phone #:	Daytime:	Evening:
Email:		

Type(s) of animals you are interested in fostering (dogs, cats, puppies, and kittens; other): _____

Have you fostered animals before? _____

If not, what experience have you had with animals that would be helpful in fostering? _____

Are you willing to care for a special needs animal? Yes No

Do you live in a House Apartment Condo Other _____

Do you have a fenced yard? Yes No If yes, what height is it? _____

Are there any children in your household? Yes No If yes, what are their ages? _____

Do any members of your household have allergies? Yes No

Will you be able to keep the foster animals separate from your own if necessary? Yes No

(This usually applies to sick cats only)

Where do you plan to keep your foster animals? _____

How many hours per day will your foster animal be without adult care? _____

What will you do to find your foster animal if it becomes lost? _____

What pets have you had in the past, if any? _____

Where are they now? _____

Do you have any pets in your household now: Yes No

If yes, what type and quantity? _____

What are their ages? _____

Are they spayed or neutered? _____

Are their vaccinations current? _____

Are they currently licensed? _____

If dog(s), what breed(s) are they? _____

If cat(s), are they kept indoors, outdoors, or both? _____

If cat(s), are they declawed? _____

Can you accept the fact that some foster animals may not survive due to illness/injury, and may have to be humanely euthanized? Do you understand that this decision is up to the Pioneer Humane Society (PHS) staff, and will be performed by a licensed technician? Yes No

Do you understand that anyone interested in adopting your foster animals (including yourself) must go through the standard adoption process, and approval of the adoption staff? Yes No

Please list two personal references:

Name	Address	Phone #

I have answered the questions above truthfully and completely. I understand that although PHS takes reasonable care to screen animals for foster care placement, it makes no guarantee relating to the animals' health, behavior or actions. I understand that I receive foster care animals at my own risk and can reject or return any animals for which PHS has asked me to provide care. I indemnify and hold PHS free and harmless from all liability arising out of any and all claims, demands, losses, damages, action, judgment of every 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.

Signature

Date

Pioneer Humane Society
P.O. Box 1876 * Pendleton * OR 97801
541-276-0181

For staff use only: Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No Staff initials: _____ Date: _____ Comments: _____ _____ _____ _____ _____
