



## FOSTER APPLICATION/AGREEMENT

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

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Do you live in a (*circle*): House Apartment Condo/Townhome Duplex Mobile Home

Do you (*circle*): Rent Own

If you rent, do you have permission from your landlord to have a dog(s) (*circle*)? YES NO

Name of Landlord: \_\_\_\_\_

Landlord Phone Number: \_\_\_\_\_

Does your yard have a fence (*circle*)? YES NO

Type of fence? \_\_\_\_\_

Height of fence? \_\_\_\_\_

How many adults live at this address? \_\_\_\_\_

Number of women: \_\_\_\_\_ Number of men: \_\_\_\_\_

Are there children in the home (*circle*)? YES NO

If yes, please list the ages: \_\_\_\_\_

Do you have any dogs or cats currently in your home (*circle*)?      YES    NO

If yes, list names, ages, and breeds: \_\_\_\_\_

Are your animals spayed/neutered (*circle*)?      YES    NO

Are your animals current on vaccines (*circle*)?      YES    NO

What animal hospital/clinic do you use? \_\_\_\_\_

List their address: \_\_\_\_\_

List their phone number: \_\_\_\_\_

Have you ever fostered a dog before (*circle*)?      YES    NO

Where will the foster dog stay when you are not home? \_\_\_\_\_

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

Are you willing to take the foster dog to the vet for any vetting needs? (*Paid for by FSDR*)

(*circle*)      YES    NO

Are you a part of any other animal organization, and if so which one? \_\_\_\_\_

Have you ever voluntarily surrendered an animal to a shelter or rescue (*circle*)? YES NO

If yes, please list:

- Why: \_\_\_\_\_  
\_\_\_\_\_
- When: \_\_\_\_\_
- Where: \_\_\_\_\_

Why would you like to foster? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How did you hear about Fawn's Small Dog Rescue? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list any additional comments you may have: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_