

## FOSTER Application

Name:
Age: □(25-30) □ (30-45) □ (45-60) □ (Over 60)
Home Address:
E-mail Address: Home Phone:
Cellular Phone: Business Phone:
Other: Best Time to Call:
Preferred Phone for us to reach you on?: [] Home [] Cell [] Business [] Other
Do you live in a: [] House [] Apartment [] Condo [] Other
Do you: [] Rent [] Own If you rent, do you have the landlord's permission to
keep a dog?: [] Yes [] No  Please Provide A Copy of Your Lease Agreement Pertaining To Dogs On The Premises
How many hours per day will your foster dog be left alone?:
Where will he/she stay during the time you are not at home?:
Will the dog sleep: [] Indoors [] Outdoors Please explain?:
Number of Adults in your home?: []1[]2[]3[]4[]
Number of Children: []1[]2[]3[]4 Ages of Children:
Do you or any family members have allergies? [] Yes [] No
Are ALL members in the household in agreement to fostering a rescue dog as part of the family?
[] Yes [] No
[], 49 [], 44
Do you currently own dogs?: [] Yes [] No How many?: []1[]2[]3 or [] more
Are your current dogs spayed/neutered?: [] Yes [] No If not, reason why:
How are your dogs fed?: [] Free Feed [] Set Meal Times [] Other
What food are you currently feeding your dogs:
Have you owned dogs in the past? [] Yes [] No If so, explain your experience & activities with
them:
Any other types of animals do you currently own?:
EXPERIENCE WITH DOGS
The following questions help us asses your experience with dogs so that we can place an appropriate foster dog in
your home. You do not need experience in all of these areas to be approved as a foster home.
Have you had experience in any of the following? Please check all that apply:
[] Crate Training a Dog [] Obedience Training a Dog [] Raising a Litter
[] Modifying Behavior Problems [] Potty Training a Dog <u>How Recent</u> .
Please understand that we rarely know whether a dog is housebroken or not - are you willing, and
able, to potty-train / housebreak this dog? [] Yes [] No
Please list any other experience that you feel will be beneficial while fostering our dogs;
Length of time you are willing to foster: []1 Month []3 Months [] As Long As Needed
Check types of confinement you can provide: [] Crate [] Fenced Yard [] Kennel Run [] Other (Please
Specify):
What circumstances would force you to return a foster dog in your care?:



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What if your foster dog turns out to be a "barker"?:	
What will you do if your foster dog knocks over a plant or	chews something in your home?:
What will you do if your foster dog has a potty "accident"?	D:
Veterinarian Information: Veterinarian's Name:  Vet Phone:  Vet Address:	
Personal Reference: (Please Do Not Use Relative	<u>e)</u>
Name:Address: Mobile Phone:	
E-Mail:	
Would you be willing to let one of our Representatives [ ] Yes [ ] No `If not, Why?:	
Foster parents are encouraged to maintain an "Aunt" in their care; but it does occasionally happen that the completely that adoption into the home is best for the would be happy to work with to complete.	foster parent and dog bond so
Do you understand that if you wish to adopt your fost Adoption Application and pay the set adoption fee for [ ] Yes [ ] No	
All of the above information I have given is true & complete. I ag OCPOUNDHOUNDS Small Breed Rescue. I understand that it is particular dog. I will not hold OCPOUNDHOUNDS Small Breed harm caused directly or indirectly to any person or property by any time to help.	my decision whether or not to foster any Rescue responsible for any damage, injury, or
You must be at least 21 years of age to f	oster for our organization.
OCPOUNDHOUNDS Small Breed Rescue, at its sole discretion, rany, or no, reason.	eserves the right to refuse any application for
I have read the disclaimer and agree to these terms and conditions	Initial Here:
Signature	Date:
Print Name	