



Animal Harbor Foster Application

This foster application is for those willing to commit to housing a pet for a time determined by Animal Harbor or until the pet is adopted into its forever home. You must be willing to bring the animal back to the shelter for any required vaccinations, medications, or vet appointments. You will also be responsible for bringing the animal to the shelter for its meet and greet with its potential adopters at the appointed time determined by Animal Harbor and the adopter.

Today's Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____

E-Mail: _____

Would you be willing to take a pet home within 24 hours? ___ Yes ___ No

If no, when will you be available to start fostering? _____

Are there any upcoming dates when you can't foster? _____

Foster Home Information

Human Household Members	Age	How will they be involved in care?

Animal Household Members	Age	Breed	Sex	Date of Rabies Vaccination

In order to be approved to foster for Animal Harbor, all animals in your home must be up-to-date on vaccines, including Bordetella.

Please list your vet reference: _____ Phone: _____

Please describe your residence (apartment, condo, house, etc.):

If needed, do you have approval to have a foster pet in your home? ___ Yes ___ No ___ Not applicable

Please list your landlord: _____ Phone: _____

Do you have a secure and private fenced yard (a fence through which a dog cannot see, that is at least 6 feet high, and is not a communal yard?) NOTE: A private fenced yard is not necessary for fostering, but it is helpful for us in making placement decisions. ___ Yes ___ No

Describe where you will be keeping your foster animal(s), including how you will separate them from your own animals, if applicable:

Approximately how long, on an average day, will foster animal(s) be left alone in the home (without people to monitor eating, behavior and elimination)? NOTE: It's ok to leave your foster pet alone, but your answer is helpful for us in making placement decisions

Previous experience with animals and/or foster care:

My household is able to foster (please check all that apply):

Cats and Kittens		Dogs and Puppies	
<input type="checkbox"/>	Pregnant cat	<input type="checkbox"/>	Pregnant dog
<input type="checkbox"/>	Nursing mother cat and litter	<input type="checkbox"/>	Nursing mother dog and litter
<input type="checkbox"/>	Kittens: 0-4 weeks of age	<input type="checkbox"/>	Puppies: 0-4 weeks of age
<input type="checkbox"/>	Older kittens: 4-10 weeks of age	<input type="checkbox"/>	Older puppies: 4-10 weeks of age
<input type="checkbox"/>	Adult cat	<input type="checkbox"/>	Adult dog
<input type="checkbox"/>	Recovering from injury or surgery	<input type="checkbox"/>	Recovering from injury or surgery
<input type="checkbox"/>	Special medical needs	<input type="checkbox"/>	Special medical needs
<input type="checkbox"/>	Special behavioral needs	<input type="checkbox"/>	Special behavioral needs

Is there anything else you would like to share about yourself or your experience?

I certify that the information provided in this application is accurate and complete and I understand and agree that I will bring the pet back to the shelter for medical care and the meet and greet with potential adopters at the appointed times. I also agree to a homecheck prior to the pet coming into my home.

Signature _____ Date _____