

*Animal House Sanctuary
Foster Application
AHSAdopt@Gmail.com*

Date: _____

Name: _____ Date of birth _____

Drivers License # _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Alt Phone: _____

Email: _____

1. Why are you interested in fostering a dog/cat? _____

2. Do you have any preferences as to species, breed, age, sex, length of hair, weight, size, etc.?

Please specify:

Please circle all that applies: Are you willing and able to foster long term/short term/temp foster/medicals?

3. Have you ever owned a pet before? YES or NO

If yes, do you still own it? YES or NO

If no, what happened to the animal: _____

4. What pets do you currently have in your household? (Use back of form if necessary) _____

Dog(s): _____ Cats(s): _____ Age(s): _____

Pets breed and energy level? _____

Spayed/Neutered? (Please circle) Yes or No

Where is the pet kept/housed, Indoor/outdoor? _____

Approximate date(s) of last shot series and type of shots* _____

Are all pets in home current on heartworm and flea prevention? _____

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5. List pets owned in the past 5 years other than those listed above (use back of form if necessary)

Dog/Cat, Spayed/Neutered, Kept/Housed Where? Time Owned? What happened to pet?

6. Who is your current veterinarian? _____

Veterinarian phone number and/or address? _____

Will you allow us to contact your vet for a reference check? YES NO

If yes, please sign here _____ DATE _____

7. Do you live in a: (Please circle one): House Apartment Townhouse Mobile Home

Do you rent or own? _____ If you rent: does your landlord allow pets? YES or NO

Landlord Name and Number: _____

Are you willing to provide us with a copy of your lease stating pets are allowed? YES or NO

8. Is there a limit to the number or size of pets allowed per your lease? YES or NO

Explain _____

Does your lease require that cats be declawed? YES or NO

9. How long have you lived at the above address? _____ Years _____ months

10. How many people live in the household? _____ Adults _____ children (17 & under)

11. Do all the adults in the home know you are planning on fostering a pet? YES or NO

12. What are the ages of the children that are in the home? _____

13. Do any family members have allergies to animals or asthma? YES or NO

14. Where will the pet be kept during the day? _____

Where will the pet be kept overnight? _____

15. How many hours of the day will the pet be left alone? _____

16. For what reason, if any, would you feel compelled to give up an animal? (Circle all that apply)

Housetraining problems Litterbox problems Animal aggression People aggression

Medical expenses Size (too big) Not enough time for pet

Children no longer living at home Fence jumper/gets out of yard Destructive in yard/home

Other (explain) _____

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17. Will you authorize a visit to your home before or after fostering a pet? YES or NO

If yes, please sign here _____ Date _____

Dog Fosters answer the following questions:

18. If you live in an apartment or do not have a fence:

Are you willing to walk your dog when it is cold, dark, or raining? YES or NO

19. Are you prepared to housetrain a dog? YES or NO

Would you return a dog if you have difficulty house training him/her? YES or NO

20. What will you do if your dog soils the floor or chews the furniture? _____

21. Do you know what heartworm disease is? YES or NO

22. If you own a dog, what is your current heartworm prevention program? _____

23. How will you ensure your dog stays on your property when you are not there? (Please circle all

That applies):

In house

Kennel/dog run outside

Fenced yard

on chain/rope

Garage

Patio

on leash in house

In a crate in house

Other _____

24. Are you willing use a crate if recommended? YES or NO

If no, why not? _____

Cat Fosters answer the following questions:

25. Would you like your cat to have the freedom to go outside? YES or NO

26. What will you do if your cat develops litter box problems? _____

27. What will you do if your cat scratches the furniture? _____

28. If you have a dog, has it been exposed to cats? YES or NO

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29. Full name and date of birth of every adult in the home, beside yourself. If you need more space use the back of this paper.

Name _____ D.O.B _____

Name _____ D.O.B _____

Name _____ D.O.B _____

Name _____ D.O.B _____

30. Please provide a list of **references** please include name, contact information and relationship.

Name: _____ Phone #: _____ Relationship: _____

Name: _____ Phone #: _____ Relationship: _____

Do you agree and understand the animal under your care while in our foster program is property of Animal House Sanctuary, and only Animal House Sanctuary can adopt the animal out and collect an adoption fee. Do you **AGREE** to these terms and conditions?

Yes / No

Foster's signature _____

Rescue Representative

Signature _____