

# Foster Application

**Thank you for your interest in temporarily fostering an animal for the SPCA, please fill out this application in its entirety.**

Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Driver's License number: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Primary Phone:\_(\_\_\_\_\_)\_\_\_\_\_ Secondary Phone:\_(\_\_\_\_\_)\_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone Number\_(\_\_\_\_\_)\_\_\_\_\_

Email: \_\_\_\_\_ Best way to contact you: Phone / Email

- 1) Currently employed? YES / NO Employer Name & Phone Number: \_\_\_\_\_
- 2) Do you currently have pets in your home? YES / NO If yes, what kind? \_\_\_\_\_  
 If applicable, what breed? \_\_\_\_\_ Are they spayed/neutered? YES / NO
- 3) Do you currently have children living at home? YES / NO If yes, what ages? \_\_\_\_\_
- 4) Do you have a fenced yard? (Dog fosters only) YES / NO
- 5) How many hours per day will the foster animals be left alone? \_\_\_\_\_
- 6) In the event that we do not have the necessary supplies needed (food, crates, treats, etc.) are you prepared to provide these for your foster? YES / NO  
**\*\* Crates are required for foster dogs, to be used when you are not home to prevent damage to your property and injury to the dog. The SPCA is not liable for damages that may occur during the fostering period. \*\***
- 7) Have you fostered in the past? YES / NO If so, for who? \_\_\_\_\_
- 8) Why do you want to foster? \_\_\_\_\_
- 9) How did you find out about our foster program? \_\_\_\_\_

**I AM ABLE TO FOSTER:** (Please check all that apply)  **This is a one time foster.**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Pregnant Dogs              | <input type="checkbox"/> Pregnant Cats                 | <input type="checkbox"/> Emaciated Animals                            |
| <input type="checkbox"/> Mom and puppies            | <input type="checkbox"/> Motherless Kittens 4 wks & up | <input type="checkbox"/> Broken Limbs / Orthopedic                    |
| <input type="checkbox"/> Puppies                    | <input type="checkbox"/> Bottle Babies under 4 wks     | <input type="checkbox"/> Death of Owner / Depression                  |
| <input type="checkbox"/> Senior Dogs                | <input type="checkbox"/> Moms and Kittens              | <input type="checkbox"/> Contagious Illness (Kennel Cough, URI, etc.) |
| <input type="checkbox"/> Socialization Cases (Dogs) | <input type="checkbox"/> Senior Cats                   | <input type="checkbox"/> Non-Contagious Illness                       |
| <input type="checkbox"/> Long Timer (Dogs)          | <input type="checkbox"/> Socialization Cases (Cats)    |   |
| <input type="checkbox"/> Breed Restriction: _____   |  |   |

**Personal Information Release**

I, authorize the Hamilton County Sheriff's Office to release information regarding any Traffic or Criminal Convictions that I have on file. If it is necessary to verify this authorization, I can be contacted at this telephone number \_\_\_\_\_. This authorization is void if not exercised by the person or organization named on this form within 1 year from the date signed. I hereby agree to indemnify the County of Hamilton and the Hamilton County Sheriff and his representatives for any liability arising out of the improper use of the information provided. \*\* I have answered the questions above truthfully. I understand that although the SPCA takes reasonable care to screen animals for foster care placement, it makes no guarantee in relation to the animal's health, or behavior. **I understand that I receive foster animals at my own risk and can reject or return any animals at any time. I indemnify and hold the SPCA free and harmless from all liability arising out of any and all claims, demand, losses, damages, action, and judgment of any kind which may occur to or be suffered by me, members of my household, or any third parties arising out of this agreement. I also understand the SPCA reserves the right to perform home visits before, during or after a foster animal is taken home.**

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_