

# HARBOR HUMANE SOCIETY

## FOSTER FRIEND APPLICATION

|                  |      |        |
|------------------|------|--------|
| Society Use Only |      |        |
|                  |      | A<br>D |
| Home/Rent        | Vet. | Adults |

Please answer the following questions to help us understand your background as well as the type of foster home you can provide our animals. Upon receipt of the application, the foster coordinator will contact you to discuss the program in greater detail and answer any questions you may have.

### (A) Personal Information

Name \_\_\_\_\_ Date of Application \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Are you over 18 years of age? *Yes No* Do you run a day care facility? *Yes No*

### Household Information:

Number of adults in household? \_\_\_\_\_ Number of children in household? \_\_\_\_\_ Children's Ages \_\_\_\_\_

Name of ALL adults in household \_\_\_\_\_

Circle any of the following who you live with or live with you. **Parents In-laws Friends Roommate(s) Spouse**

In which type of home do you live? *House Mobile Home Apartment Duplex Condo Other*

Do you *Own* or *Rent* your home? Landlord's Name/Phone #: \_\_\_\_\_

Which member of the household will be the primary caretaker of the foster animal(s)? \_\_\_\_\_

### (B) Personal Pet Profile

**Pet History:** List pets currently owned, including small caged pets.

| Animal Type (dog, cat, other) | Name | Breed | Age | Sex M/F | Spayed or Neutered? (Y or N) | Kept Indoors? Or Outdoors? | How long owned? | Vaccinations - current? |
|-------------------------------|------|-------|-----|---------|------------------------------|----------------------------|-----------------|-------------------------|
|                               |      |       |     |         |                              |                            |                 |                         |
|                               |      |       |     |         |                              |                            |                 |                         |
|                               |      |       |     |         |                              |                            |                 |                         |
|                               |      |       |     |         |                              |                            |                 |                         |
|                               |      |       |     |         |                              |                            |                 |                         |

List history of medical issues of the above pets, by line name

If you have current pets, have they ever lived with another pet before? *Yes No N/A*

If yes, what types of other animals? \_\_\_\_\_

If you have current pets, how is their behavior toward other animals? \_\_\_\_\_

Name of Current Veterinarian or Clinic \_\_\_\_\_ Phone Number \_\_\_\_\_

Under whose name and what address are records kept? \_\_\_\_\_

Do you provide foster homes for any other organizations? *Yes No* If yes, where? \_\_\_\_\_

List the names and phone numbers of two personal references:

1. \_\_\_\_\_

2. \_\_\_\_\_

**(C) Relevant Experience**

Please list any/all other foster or rescue programs you are a part of (including caring for feral cats):

What kind of animals are you available to foster? (Please circle all that apply)

*Dogs Cats Puppies Kittens Dogs with kennel cough Cats with upper respiratory infections*

*Mother dog with puppies Mother cat with kittens Birds Rabbits Rodents Reptiles*

If you can foster puppies or kittens, are you willing to foster a litter, and if so, how many? \_\_\_\_\_

What behavior problem(s) are you willing to handle? (*Please keep in mind that we can never be certain what type of behavior problems may exist until animals are placed in a home*) \_\_\_\_\_

How many hours will the foster animal(s) be home alone during a typical day? \_\_\_\_\_

Describe area where the foster animal(s) will be kept \_\_\_\_\_

Give a brief description of your experience with very young, ill, injured, and or unsocialized animals: \_\_\_\_\_

Do you have a completely fenced in yard? *Yes No* What type? \_\_\_\_\_ How high at lowest point? \_\_\_\_\_

If not, how do you plan to insure that the foster pet (if a dog) will receive adequate exercise? \_\_\_\_\_

Do you have a completely separate area for the foster animal(s)? *Yes No* Explain: \_\_\_\_\_

Are you able to transport the foster animal(s) to our location and other locations as needed? (Vet, Humane Society adoption events, etc. within the Ottawa County/Grand Rapids/Kent County area) *Yes No*

Are you interested in permanently adopting an animal in the near future? *Yes No*

Why would you like to become a Foster Friend? \_\_\_\_\_

Please answer the following questions:

1. Because of the health risks, the Humane Society asks that you do not take dogs to public parks, dog beaches or other areas of high dog activity, are you able to comply with this request? *Yes No*
2. Do you understand that all animals are placed in your home on a temporary basis and when the requests of the shelter have been met (i.e. when the animal is healthy or of ideal age/size), the animal must be returned to the Harbor Humane Society? *Yes No*
3. Do you understand that all foster animals belong to the Harbor Humane Society and can be taken out of foster care at any time? *Yes No*
4. Do you understand that the Harbor Humane Society may euthanize foster animals at any time for health or temperament reasons? *Yes No*
5. Do you agree to keep all foster cats inside your home and all foster dogs on a six foot leash at all times when outside of the home? *Yes No*
6. Do you agree to notify the Harbor Humane Society if your foster animal exhibits any sign of aggression? (*Please understand that putting aggressive animals in the community is a danger to others and a liability to Harbor Humane Society*) *Yes No*
7. Do you agree to notify the Harbor Humane Society if the foster animal(s) escapes from your home? *Yes No*
8. During the foster stay, you are the primary caretaker of the foster animal(s) and therefore, the animal(s) should remain in your home the entire foster period (*unless otherwise specified by Harbor Humane Society*). Are you able to comply with this? *Yes No*
9. Do you understand that foster animal(s) can only be treated by the Humane Harbor Humane Society veterinarian department and you can not take them to your veterinarian? *Yes No*

I certify that the above information is true and correct. I understand that any falsification of the above information may be grounds for denial of this application or termination of my volunteer status. I acknowledge that this application remains the property of Harbor Humane Society. I authorize the Center to conduct an on-site inspection of the premises where the animal(s) will be kept. I waive my rights to make any claim of liability for any injury or damages that may occur related to my participation as a Foster Friend Volunteer with the Harbor Humane Society.

Thank you for your willingness to help animals in need. We will contact you in 5-7 business days. For more information, please contact our Foster Friend Coordinator.

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Applicant's Signature

Date