



The Animal House

Companion Animal Rescue and Adoption

Application to Foster

Name: _____

Address: _____

City, State, ZIP: _____ Email: _____

Phone Number(s): Home: _____ Cell: _____

Work: _____ Employer: _____

Emergency Contact: Name: _____ Phone: _____

Previous Volunteer Experience: _____

Please list the name, age and relationship to you of all the people living in your home:

Name	Age	Relationship

Pets currently living in your home (list additional at bottom of form, if necessary):

Species	Breed	Age	Altered	Current Vaccines
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

For any cats listed above, please indicate whether they have been tested for:

Feline Leukemia Yes No Result: Positive Negative

Feline Aids: Yes No Result: Positive Negative

Veterinarian: Name/Practice: _____

Address: _____

City, State, ZIP: _____ Phone: _____

Do you: Rent Own your home?

If Rent: Landlord Name: _____ Phone: _____

Please check all species and animals you would be willing to foster along with the maximum number you can comfortably accommodate:

- | | | | |
|------------------------------------|-----------------------------------------|-------------------------------------------|-------------------------------------------------------------------|
| <input type="checkbox"/> Adult Cat | <input type="checkbox"/> Pregnant Cat | <input type="checkbox"/> Cat with Kittens | <input type="checkbox"/> Orphaned Kittens |
| <input type="checkbox"/> Kitten | <input type="checkbox"/> Rabbit | <input type="checkbox"/> Guinea Pig | <input type="checkbox"/> Hamster <input type="checkbox"/> Gerbil |
| <input type="checkbox"/> Rat | <input type="checkbox"/> Mouse | <input type="checkbox"/> Ferret | <input type="checkbox"/> Turtle <input type="checkbox"/> Tortoise |
| <input type="checkbox"/> Lizard | Number of Animals you can foster: _____ | | |

Please list all equipment you have that can be used in fostering these animals (cages, aquariums, terrariums, habitats, litter boxes, carriers, beds, etc.):

Please list any items that you do not have but would be prepared to provide at your expense for fostered animals:

If you are approved as a foster home, you may have an animal for as little as a week or it may be for several months or more until an appropriate forever home can be secured. Animal House cannot accurately predict the projected length of the foster term for any given animal. If you plan a vacation, you will be required to contact an Animal House representative as early as possible in order for us to secure a temporary foster placement for the animal(s) in your care. While you are fostering, Animal House representatives may contact you from time to time by phone or email to inquire about the animal(s). You must agree to make the animals available at adoption centers from time to time and to either transport the animal(s) or allow Animal House to pick them up for veterinary care or other reasons.

By signing this form, you agree 1) to allow Animal House representatives to verify the information provided, 2) that all information provided is true and accurate, and 3) that you will abide by the stated terms, should you be approved for fostering.

Signature: _____ Date: _____