

FOSTER APPLICATION

Foster's Information

Name:		DOB:		
Street Address:				
City, State, Zip:				
Driver's License #:		State:		
Email:				
Phone: (H) (C)	(V	V)		
Person to contact in case of emergency:				
Name:	Phone:			
Living Arrangements				
Do you:				
☐ Own Home☐ Own Apartment☐ Rent Home☐ Rent Apartment☐ Other				
If renting, please provide landlord's name	& phone:			
Do you have a fenced in yard: Yes	No			
Type of fence:				
Are there any slats/openings that could allow a small dog to get in/				
out? YES NO				

Please list all p	persons living with y	ou: (if none, write	e n/a)
Name:		Age:	Relationship:
Is everyone in	your home aware t	hat you have appl	ied to foster?
☐ Yes			
□ No			
Is everyone ag	reeable to having a	foster at home?	
	, G		
☐ Yes			
□ No			
If no, please e	xplain:		
, .	•		
Animal Care			
Please list all a	nimals living with y	ou: (if none, write	n/a)
Name:	Age:	Breed:	Date of last
			vaccinations:

Phone

Hours per day that foster(s) will be left alone:

Veterinarian Name

During the week:
□ Less than 4 hours□ 4-8 hours□ 8-10 hours□ More than 10 hours
During the weekend:
□ Less than 4 hours□ 4-8 hours□ 8-10 hours□ More than 10 hours
While left alone, foster(s) will be:
 ☐ Individual crate ☐ Shared crate ☐ In a restricted area of home ☐ Free to roam ☐ Other (please explain)
Do you understand that sometimes a complete history and temperament of a rescue dog may not be known?
 ☐ Yes ☐ No ☐ I only want to foster a dog with a known history
Are you able to transport foster to vet and adoption events:
☐ Yes ☐ No

Dog Training

Do you have any dog training experience ☐ Yes ☐ No If yes explain	
Would you be opened to doing some dog training ☐ Yes ☐ No Do you have any concerns about fostering? If so, please explain:	
By submitting this application, I affirm that the facts set forth in it are true complete to the best of my knowledge. I understand that if I am accepted foster, that I am not the rightful owner of the dog and any medical decisions/rehoming decisions will be made Friends for Life Dog Rescue. (I understand that any false statements, omissions, or other misrepresent made by me on this application may result in an immediate termination of foster contract and the foster dog to be returned. FFLDR shall be held had from and against any and all claims and damages of every kind, for injury person or persons and for damage to or loss of property, arising out of or attributed to, directly or indirectly, the operations or performance of the named volunteer (foster) under this agreement, including claims and dar arising in whole or part from the negligence of FFLDR. I agree to notify FF any injuries such as illness, escapes, injuries, or any concerns pertaining to foster as soon as possible.	d as a FFLDR) rations of the armless to any above- nages FLDR of
Signature: Date:	