

Dog Foster Care Application

Thank you for taking the time to fill out this application. Your information will remain confidential and used only as part of the HTAR Foster Care Program.

PERSONAL	INFORMATION	(Please print):				
Name:				Age:	Date: _	
Address:						
City:				Stat	e: Zip: _	
Home phor	ne:		Work	/Cell phone: _		
Email:						
How did yo	ou hear about us	s?				
How many Adults over Does anyor	the age of 21 (i	our household? ncluding self): old have allergies	Ages:		n (under 21):	Ages:
Do vou live	in: HOUSE	APARTMENT	Г CONDO	DUPLEX	MOBILE HO	ME TOWNHOME
•						
able	0	receive positive co	, ,	g animals in you	r home is accept	able. You will not be
Dog/Cat	Breed	Name	Age	M/F	Altered?	How long owned?
vaccinations	. If you have any	concerns, please di	scuss the idea of f	ostering animal	s with your veter	
Who will b	e the primary c	aretaker of your	foster dog(s)? _			
_	☐ Unfendence:	ced yard Made on the super of	of? Wood	l ⊂ □Chain li		pletely fenced yard □ Other
If you don't	t have a fenced i	in yard, do you aş	gree to keep you	ır foster dog oı	n leash at all tir	mes outside? □ Yes □No

	•	scribe yo	ur level o	f experience with dogs? check al	11 6	
□Never had a dog □Had one or more as an adult			ı	□Had childhood pet dog □Have experience with powerful breeds		
				*	*	
				ing medical problems with a pe		
	•			ng kennel/resort/pet sitting ser		
				vioral problems with a personal	aog	
	•			nary hospital		
	rofessional					
⊔Have p	revious fos	ster/ rescu	e experie	nce, if yes, please describe:		
				dogs □ medium dogs □ large		
What typ	es of dog	are you in	terested :	in fostering? Check all that apply		
□Adult c	_	,		□Puppies		
	with nursi	ing puppi	es	☐Unweaned puppies/Bottle babies		
	g/puppy	01 11		□Injured dog/puppy		
	uppy with	behaviora	ıl issues	□Long-term hospice care		
	/Bully bre			O	•	
How ma	ny hours d	uring the	AVERA	GE day will this dog spend WI	ΓHOUT a human?	
Where w	ill this dog	be when	someone	is home?		
Where w	ill this dog	be when	alone?	Where will this dog sleep at night?		
What site	uations do	vou feel i	innrenar	ed for?		
	ve barking	-	unprepur	☐Destructive chewing	□Not housetrained	
□ Digging	0			□Escaping	☐ Resource (food/toy) aggression	
		dersociali	zed dog	□Not good with children		
	od with sm			□Scratching/biting	☐ Administering medications	
	ng on-goin			□Very high activity level	Deaf/Blind dogs	
	ng on-gon	ig trairing	,	- very ingit activity level	Dear, billia dogs	
Do vou b	nave a pref	erence on	•			
				olease list size preference:		
Breed?	YES	NO	If yes 1	please list breed you prefer:		
Age?	YES	NO				
1160.	TLO	110	11 y co, 1	orease list age preference.		
Please tel	ll us anythi	ng else yo	ou would	like us to know to help match ye	ou up with the right foster animal:	
Staff Not	es:					

Please read the following carefully:

HTAR determines the criteria for fostering, decides which animals are eligible for foster care, and appoints foster caregivers from a pre-approved list of providers. HTAR will require you to go fill out a foster application and a Happy Tails Foster Care Agreement, prior to being accepted as a foster parent. HTAR foster care volunteers may always refuse any specific request for any reason. HTAR staff will inform you of any medical treatments to be administered, the anticipated length of the foster-care period, the objectives of each particular placement (restoring to health, rearing to adoptable age, socialization, etc.), and any other restrictions or expectations we may have.

You will be expected to keep the animal safe and secure, return it to HTAR when requested to do so, and not promise the animal to anyone, or imply that you have the authority to approve a potential adoption. HTAR retains ownership of all animals placed in foster care, and will make all decisions regarding the adoption & placement of the animals fostered.

HTAR cannot accommodate people fulfilling court-ordered community service within the Foster Care Program. HTAR does not accept into this program those convicted of violent crimes or crimes involving animal cruelty or neglect. Students seeking credit for school service requirements should speak with the Foster Care Coordinator to discuss the program before proceeding.

Unless otherwise arranged, the foster parent is responsible for providing all food, litter, bedding, and toys for the animal while it is in their care at home. The foster parent is responsible for transporting the animals to and from HTAR for veterinary appointments, surgery, behavior evaluations, vaccinations, etc., The foster parent may also be responsible for transporting the animal to and from adoption events, and to off-site training classes, at the Foster Care Coordinator's discretion. Upon return your foster animal to HTAR you will be required to fill out a brief questionnaire about your foster animal's behavior and personality.

I have read and understand the statements above. I certify that all the information contained in this application is true and correct. I understand that although HTAR takes reasonable care to screen animals for foster care placement, it makes no guarantees relating to the animals' health, behavior or actions. I understand that I receive foster care animals at my own risk and can decline to accept any animal for which HTAR has asked me to provide care. I acknowledge that HTAR is not responsible for any property damage or personal injury suffered by me, members of my household, including my own animals, or any third parties during a foster placement, and I assume liability to provide adequate controls to prevent such damage or injury.

Signature	Date
Witnessed By	

Return Application to:

Happy Tails Animal Rescue, Attn: Dog Foster Care Program

Email: TaylorBullock@happytailsanimalrescue.com