

Tri-Lakes Humane Society Foster Care Sign Up Form

*Please know that the animal(s) you're interested in fostering may not be available at this time. Our main priority is to place animals in foster homes that match both the needs of the animal and the needs of the foster.

Name: _____ Date of Birth: _____

Address: _____

Phone Number: _____ Email: _____

Occupation: _____ Place of Employment: _____

Type of Housing(Rent/Own)Apartment/House _____

Number of People residing in home _____

Ages of people in the home _____

I am willing to foster the following (check all that apply):

___ Cat with kittens

___ Dog with puppies

___ Orphaned kittens

___ Orphaned puppies

___ Mildly sick cat/kittens

___ Mildly sick dog/puppies

___ Healthy adult cat

___ Healthy adult dog

___ Hospice for terminal cat

___ Hospice f for terminal cat

___ Senior cat

___ Senior dog

1. Does anyone in the home have allergies to cats/dogs?
2. Is the whole family on board with fostering animals?
3. Are the pets currently in your home spayed/neutered? Yes/No....If No why?
4. Are you willing to foster an animal on medication? Yes/No
5. Longest period of time you will be able to foster?
6. Will animals be indoor? Outdoor? Both?
7. If fostering a dog is there an outdoor space? Yes/No Fenced? Yes/No
Height of fence
8. How many hours a day are you away from the home?
9. Have you had any animals pass of an illness in the last 7 years? What from?
Do you still live in that home?

10. Are all pets in home current on vaccinations? Yes/No

11. Are you willing to allow home visits to fostered animals from the shelter staff?

12. Have you fostered in the past?

13. Are you currently fostering for another organization? If Yes, Who

14. Are you willing to abide by all animal control laws with regard to your foster animal?

If you rent , Landlord's name _____

Phone Number:_____

Foster Parent Signature:_____Date: _____