



# 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 (Circle One) Rent / Own & Apartment / House

Number of People residing in home \_\_\_\_\_

Ages of people in the home \_\_\_\_\_

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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? Yes / No  
If Yes. Mitigation Plan: \_\_\_\_\_  
\_\_\_\_\_
  2. Do all family members support the desire to foster animals? Yes / No
  3. Are any 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. If fostering a dog is there an outdoor space? Yes/No Fenced? Yes/No  
Height of fence: \_\_\_\_\_
  7. How many hours a day are you away from home? \_\_\_\_\_
  8. Have any of your pets died from an illness in the last 7 years? Yes / No  
If yes: which illness? \_\_\_\_\_  
\_\_\_\_\_
- Do you still live in that home? Yes / No
9. Are all pets in home current on vaccinations? Yes / No
  10. Do you understand we may periodically perform home visits to fostered animals from the shelter staff? Yes / No
  11. Have you fostered in the past? Yes / No
  12. Are you willing to abide by all animal control laws with regard to your foster animal(s)? Yes / No

If you rent , Landlord's name \_\_\_\_\_  
Contact Information: \_\_\_\_\_

Foster Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_