



Foster Home Program Application

First name: _____ MI: _____ Last name: _____

Current Address: _____ Apt. # _____

City: _____ State: _____ Zip code: _____

Home phone: _____ Cell: _____ Work _____

Email address: _____

Driver's License # _____ DOB: _____

Please complete the following questionnaire. If an answer does not apply, please indicate with "N/A" in the appropriate space.

1. I can foster: Dog(s) Cat(s) Kitten(s) Puppy(puppies) How many? _____ Litters? _____

2. Do you live in a: House Apartment Mobile home Condo

3. Do you rent or own? Own Rent

a. If you are a renter, does your landlord allow pets? yes no not sure

b. Any restrictions? _____

c. Name and phone number of leasing agent or landlord: _____

4. Do you currently own, or in the past 5 years owned any pets? yes no

If yes, please complete the following:

Type of Pet	Male/Female	Spayed/Neutered	Age	Current on Vaccinations

5. Have you adopted a pet from PAWS or the Muscogee County Humane Society before? _____
6. What Veterinary practice do you use? _____
7. If you have dogs, are they kept on flea control and heartworm prevention? yes no
If yes, what products are used? _____
8. Have you ever had a pet for a short time and it didn't work out? yes no
9. Have you ever had an animal die of unknown causes, become ill with Parvo, FeLV or FIV? yes no If yes, please explain: _____
10. Will this pet live: Outdoors only Mostly indoors/outdoors for play and elimination
 Outdoors mostly/indoors on occasion On tie-out in backyard
11. Do you have a fenced yard? yes no Type of fencing? chain-link privacy fence
 underground fence Height of fence? 4ft. 6ft.
12. If you decide to adopt your foster pet what circumstances might justify giving it up?
(Check all that apply)
- Baby Divorce Dog not getting along with other pet Moving Shedding Allergies
 Behavior problems House soiling/urine marking Destructive Travel Economy
 Too time consuming Children lost interest Fence jumping Deployment Other _____

Do you agree to release PAWS Humane from any and all liability not limited to but including: damages to home and/or property _____, spread of infection and disease to personal pet(s) due to failure to provide the necessary preventative health measures required in order to protect your pet? _____

Should you notice any signs of illness or aggression do you agree to contact PAWS immediately? _____

I understand that while PAWS will provide the food for my foster pet, other essentials (litter, bedding, toys etc.) will need to be provided by me. _____

In order to insure adequate space for the return of a foster pet, do you agree to make prior arrangements with PAWS before returning the animal? _____

PAWS Humane will never knowingly place an ill or poorly socialized pet in a foster family without first notifying the foster family of the situation. Foster families provide invaluable information in regards to how an animal responds in a home environment. Fostering an animal in need should prove to be a loving and rewarding experience for all. If you have any questions or concerns, please contact PAWS immediately at (706) 565-0035. Thank you for your application and your support!

Signed: _____ Date: _____