



FOSTER CARE PROGRAM APPLICATION

Foster Care volunteers save lives! Halifax Humane Society's Foster Care Program provides safe homes with caring individuals to care for and socialize animals that are too young, sick, injured or under socialized to be placed up for adoption. As a Foster Parent, you should remember that this is an extremely rewarding experience but can be time consuming, heartbreaking and a substantial responsibility. You are working with us to help save the lives of homeless animals, we expect that you will take this responsibility as seriously as we do. Please give yourself time to consider all aspects of fostering. If you would like to participate in this program, please complete the following and return to the Foster Coordinator:

Name: _____

Street Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone _____

Birth Date: _____ Driver License #: _____

Email Address: _____

Check here if you would prefer not to receive foster e-mail from Halifax Humane Society. We will not share your information, and you may opt out at any time.

Please answer all questions to the best of your ability by filling in or checking off as appropriate:

Have you fostered before? Yes No If yes, what type animal? _____

Which organization and what was the outcome? _____

What type of animal are you interested in fostering? (Check the most appropriate answer for each category)

FELINES

	No	Possibly	Definitely
Mama cat & kittens (litters can be 3-7 kittens)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kittens (bottle fed)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kittens (past bottle feeding)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Injured cat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Injured kitten	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sick (primarily URI, underweight or skin condition)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Under-socialized cat / feral kittens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CANINES

Mama dog and pups (litters can be 4-8 puppies)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Puppies only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Injured dog	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Injured puppy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sick (primarily kennel cough, underweight or skin condition)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Under-socialized (will need TLC, basic obedience work)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Your home: Own Rent Other (explain) _____

If renting, Landlord name: _____ Phone _____

How many adults in your home? _____ How many Children? _____ Ages of children _____

Pets you currently own (Please state how many of each and their age):

_____ Cats _____ Housed: Indoors Outdoors Both

_____ Dogs _____ Housed: Indoors Outdoors Both

_____ Other (type) _____ Housed: Indoors Outdoors Both

Are all the animals in your home spayed or neutered? YES NO UNSURE

Are all the animals in your home up to date on their vaccinations? YES NO UNSURE

Does your pet / pets get along with other animals? YES NO UNSURE

Please be specific: _____

Please list two references that may also serve as contacts in case of an emergency.

Name: _____ Phone: _____

Name: _____ Phone: _____

Will you be able to provide the necessary supplies needed to care for a foster animal? (Depending on the type and age of animal this will include food, litter, bedding, toys, collar/harness, leash and possibly crates and or cages if necessary) YES NO UNSURE

How much time will your foster animal be without adult care? _____

Where will the foster animal live while at your home? _____

Are you able to give an animal medication if needed? YES NO

Information you think is pertinent to your work as a foster parent? _____

Do you have questions or concerns regarding fostering? _____

All Foster parents must take part in a one-on-one meeting when your application is approved, you will be contacted to schedule the meeting.

Please read the following statements concerning this Foster Program, initial next to each statement to indicate that you understand and agree to abide by them.

Your foster animal may not be litter or housetrained.

You understand that he/she may have accidents in your home. _____

Like many cats or dogs, your foster animal may scratch or chew on furniture, clothing, or other objects. You are comfortable working with this behavior. _____

You agree to keep all foster animal(s) indoors unless accompanied by you. Dogs must be on a leash when not in a secure fenced area and cats are to remain indoors at all times. _____

Representatives of the Halifax Humane Society may need to contact or visit you to discuss your foster animal. You understand that you may be asked to complete evaluation forms. You agree to be entirely honest and forthright regarding the animal's behavior, be it positive or negative. _____

There is some risk to your own animals, especially if your foster animal is not kept separate. You understand that Halifax Humane Society is not responsible for your own pets' safety or medical treatment. _____

Should the foster animal(s) become ill while in your care, you agree to call your Foster Coordinator or the shelter to discuss treatment.

If you take your foster animal to a veterinarian outside of the shelter without getting prior approval you will be responsible for any and all vet costs incurred. _____

You understand that Halifax Humane Society is the legal guardian of this foster animal(s). Halifax Humane Society has the final authority in regards to the Animals' adoption, treatment, or disposition, that you do not have any right or authority to keep this animal and you must not under any circumstances transfer, sell, or give this foster animal away. _____

You agree to assist Halifax Humane Society with finding a forever home for your foster Animal(s). Foster Parents can help by writing bios, posting flyers, searching websites, participating in off-site events and more. _____

You acknowledge that the Halifax Humane Society may terminate this or any other foster care arrangement at any time in its sole discretion. _____

You certify that no person residing in the household where the animal(s) will be fostered has ever been charged with or convicted of animal cruelty, neglect or abandonment. _____

You agree to hold the Halifax Humane Society harmless from any direct or consequential damages arising out of this foster care arrangement. Any damages, illnesses, diseases, and/or injuries occurring will be the responsibility of foster parent. _____

Please sign below to indicate that all information on this form is true and as complete as possible.

Signature: _____ **Date:** _____

Please include a copy of your Driver's License along with this application.

The Halifax Humane Society is a 501 (c)(3) private nonprofit organization and receives absolutely no government funding, nor funding from any city, state or national humane organization.