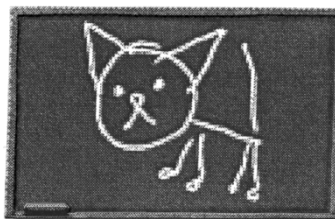


FURRY FRIENDS

P.O. Box 711
Brush Prairie, WA 98606
Fax: 1-800-353-1686
(360) 993-1097



www.furryfriendswa.org

Foster Home Application

PERSONAL INFORMATION

Name: _____ Home Phone: _____ Alt. Phone: _____
Address: _____ City: _____ Zip: _____
Email Address: _____ Employer: _____
Do you have reliable transportation? _____ Do you have a computer?

Are you able to transport to vets for medical care?

Are you able to attend adoption events at least twice per month?

How long of a commitment can you make to be a foster home? _____
Are you willing to purchase supplies as needed?

INFORMATION ABOUT YOUR HOME

Rent or Own: _____ Number of Years: _____ Square Footage: _____
Number of floors: _____ Number of Rooms: _____ Acreage: _____
Do you have a room you can use for foster animals only?

Do you have a dog and/or cat door? _____ If yes, location of the door?

If Renting:

Landlord Name: _____ Contact Number: _____

Address: _____ City: _____ Zip: _____

INFORMATION ABOUT YOUR FAMILY

How many members of the family? _____ Number of Adults: _____
Number of Children: _____ Ages of Children: _____

INFORMATION ABOUT YOUR PETS

How many pets do you have? _____ Species: _____
Name of pets: _____ Ages of Pets: _____
Are their vaccines current?

Name of your vet: _____ Contact Number: _____

REFERENCES

Please give us three references:

Name: _____	Relationship: _____	Contact Number: _____
Name: _____	Relationship: _____	Contact Number: _____
Name: _____	Relationship: _____	Contact Number: _____

OTHER AREAS OF VOLUNTEER WORK

Are you interested in any other areas of volunteer work with our organization?

Special skills or experience in these areas I would like to offer (circle all that apply)

Vet Tech Therapy Pets Foster Home Socializing/Grooming Website maintenance/design Computer Support/data entry Admin/Management Organizer Event Planner Fundraising Grant Writing Internet Research Public Speaking Publications Marketing Media Graphic Arts Photography Legal Shopping
 Working with youth & students Storage Van or Truck Building/Repairing Handicrafts Sewing

FOSTER HOME REQUIREMENTS

- *Cats are to remain indoors only, dogs on a leash when outside always
- *If renting, be able to provide proof pets are allowed and deposits paid
- *Be available for home visits from FF members & applicants for animal
- *Feed only food provided, litter provided, or recommended by FF
- *Be available to take animal to veterinarian approved by FF when needed
- *Be a non-smoker or outside smoker only
- *Be available to take animal to pet showings at least twice during the month
- *Do not smoke while in the car during transporting of animal
- *Notify FF of developing behavior issues that may lead to problems
- *Be physically capable, willing and able to spend the time necessary to provide training, medical care and companionship
- *Be available to supervise all child interactions with the animal
- *Give at least 10 days to 2 weeks notice if foster care can no longer be done
- *Be diligent in updating and recording any medical data done while in your care
- *Provide copies of all such above records to FF member
- *Return all documents, food, litter, medications, bedding, etc. belonging to FF when animal is adopted or returned to FF care
- *Be available to assist FF adoption counselors with applications and delivery

WE RECOMMEND ALL SHELTER VOLUNTEERS IN CONTACT WITH ANIMALS HAVE A CURRENT TETANUS VACCINATION

The information on this application is correct and accurate to the best of my knowledge. I acknowledge the resources involved in training new foster homes and respect that a commitment has been asked for and is offered. I agree to review the foster home procedures and training manual, attend required training and to adhere to the organizations' guidelines and principles in all contact with the public.

Signed _____ Date _____
Signature of Foster Parent

Accepted by _____ Date _____
FURRY FRIENDS Volunteer Member

Comments _____

Approved Number of Foster Animals for Home: _____

INFORMATION ABOUT FOSTER ANIMAL

Name: _____ Feline: _____ Canine: _____ Age: _____ Sex: _____
Breed: _____ Color: _____ Markings: _____
Received From: _____ Contact Number: _____
Address: _____ City: _____ Zip: _____
Reason Foster Home Is Needed: _____