Angie's Friends

Foster Application

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Pet's Name:	Date:	
Foster Criteria:		
Applicant must be 25 years or older		
Identification required with current address		
Knowledge and consent of all adults in this household		
 Must be willing and able to spend the time to provide training, medical treatment and proper care for this pet. 		
Name of Applicant:		
Name of spouse or life partner:		
Current Street Address:		
City, State and Zip Code:		
Home Phone:	Cell Phone:	
Work Phone:	May you be contacted there?	
Your Birthdate:	Spouse/Partner Birthdate:	
Oriver's License State and Number:		
Email:	Business or Personal:	

Do we have permission to contact you by email?_____

Your Occupation:_____ Full or Part Time:_____

Spouse/Partner Occupation:______ Full or Part Time:_____

Tell us why you want to foster a pet:
Have you ever had a pet before? Dog or Cat, other?
Where did you get your previous pet?
How long has (or did) it live with you? If you no longer have this pet, what became of it?
Lost. Under what circumstances:
Given away. Why?:
Sold. Why?:
Died. Of What?:
Do you currently have a pet(s)? If so, how many of what kind?
Are your current pets spayed or neutered?
Is (are) your dog(s) on heartworm preventative?
* REQUIRED ANSWER - Dogs get heartworms from?
Where would the foster stay during the day when you're not there?
Where will this pet stay during the night time?
Do you leave your windows and doors open at home?
Do you have screens on your windows and doors?
If you have a fenced yard, what type is it and how high? Examples: wood, chain-link, wrought-iron, brick/stone 4', 6', 8'

If you rent, we require a copy be provided to us of the landlord's policy on animals, which should include the limit on the number of animals allowed and their size. We also require proof the deposit has been paid before the pet is fostered.

Please provide: Apartment complex name and phone number:	
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Your landlord's name and phone number (in	a nouse):
Please provide a personal reference, who k towards animals: (may not be a relative or	
Name:	
Address:	
City, State and Zip Code:	
Best phone contact (home phone / cell / wo	rk):
authorize Angie's Friends to contact the n inspection to confirm the environment is w	e used to verify my statements and hereby ames I provided. I further agree to a home hat I claim it is. I submit this application in tect the pet I want to foster and ensure they
application is shared with anyone. It is used to ens	of the information in this application. Nothing in this sure the best possible home for our animals and is for e for that purpose.
Applicant	Date