

## **Foster Home Application**

Name:			Occupation:			
Address:			Employer:			
City:	St	Zip	Work Address:	•		
Daytime Ph: ( )						
Cell Phone: ( )			Work Phone: ( )			
Email:						
Foster home stays range from a few weeks to a few months. The animals may have behavioral or health issues.  Staff will review all facts with a foster family to ensure the best fit.						
Are you interested in fostering: Cats Dogs Small animals (rabbits, guinea pigs, ferrets, birds etc.)						
Do you have a breed or size preference?						
Do you: Rent   Own Home   Other			Where will the foster animal be cared for?			
Does your lease / landlord allow pets?						
Number of children in the home:			Hours per day the foster will be alone in the home:			
Ages:			What are the same arrangements when you are not at home?			
Do you have a fenced-in yard? Yes No			What are the care arrangements when you are not at home?			
Do you have screens on your windows? Yes No						
Do you have pets now? Yes ☐ No ☐			If no, did you have pets in the past? Yes ☐ No☐			
Please list your current pets:			Where are they now?			
Name	Breed			Sex	Age	Spayed/Neutered
Do any of your pets have behavioral issues or chronic illness? Expl				n Name of your Vet:		
bo any or your pers have behaviore	tunic or your vec.					
Please read carefully, then sign and date this document.						
BHS determines the criteria for fostering, decide which animals will be fostered, and appoint foster care providers from						
a pre-approved list. Approved "foster parents" may always refuse any specific request for timing or other reasons. BHS						
staff will inform you of any medical treatments to be given, the expected length of the foster care period, the objectives						
of the care (restoring to health, rearing to adoptable age, socializing, etc.), and any other expectations we have. You						
will be expected to keep the animal secure (inside your house, unless taken out for exercise [dogs/puppies only]), return						
the pet to BHS whenever requested to do so, and not promise the animal to anyone, or imply the authority to approve a						
potential adoption unless authorized by BHS staff. I understand that under certain circumstances my foster animal(s)						
may need to be euthanized, and I will be given a choice of whether or not to be notified.						
BHS will retain ownership of all animals in foster care, and will make all decisions regarding the adoption or euthanasia						
of the animals fostered. All adoptions will be handled by BHS staff or an authorized foster care provider. A BHS staff member may arrange a home visit prior to the final approval of this application.						
member may arrange a nome visit prior to the iniai approval of this application.						
Signature: Date:						