

Fairfield County Animal Control Fostering Application Form

I, _____ (name of foster applicant), agree that all statements in this application are made based on personal knowledge and are made for purposes of my application to foster one or more animals through Shelter's foster care program.

- I would like to foster Shelter-rescued animals. Number of animals I can foster _____.
- I have a preference for specific animals (List of their ID #'s): _____
- If any of the animals I specified are unavailable, I am open to substitution. Y ___ N ___
- Restrictions on the type of animal I can foster (For example, "No dogs over 30 lbs", "Only adult cats", etc) _____
- Where my foster animals will sleep at night: _____
- Where my foster animals will stay during the day when I am home: _____
- Where my foster animals will stay during the day when I am not home: _____

I understand that Shelter is very concerned about the security and safety of my foster animal and all the animals in its custody, as well as its ability to keep track of all animals rescued. I understand Shelter will not share this information for any reasons not connected to the foster care program or applicable lawsuits.

Name: _____

Address: _____

Phone: _____

Email: _____

Drivers License Number: _____ State of Issuance: _____

Name, address and telephone number of my employer (or business, if self-employed):

Business Name: _____

Address: _____

Phone: _____

Position: _____ Length of time with this employer: _____

I own Rent my home. Length of time at this residence: _____

If renting, Landlord's Name: _____ Phone: _____

Address: _____

I have a fenced-in yard. Height of fence: _____ The fence has a gate

The gate has a lock. Description of the latching and locking mechanism: _____

I have _____ companion animals at my home currently. The following are the details for all companion animals currently at my home.

Name, Age, Species (dog, cat, etc), Breed (for dogs only), Gender, Temperament: _____

Spayed/Neutered I have bred this animal in the past. I am currently breeding this animal.

I had elective surgery performed on this animal Cat declawed Dog debarked Other (specify) _____

Vaccinations administered and date: _____

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The name of the veterinarian(s) I use for my companion animals is (if more than one, please list all veterinarians consulted in the last 5 years; provide additional sheets for additional veterinarians):

Veterinarian Name: _____

Phone: _____

Clinic Name: _____

Address: _____

I have been a client of this vet for: _____

I have _____ children in the house. Ages: _____

List of all people living in the house and/or who have regular contact with my animal(s) and their relationship to me (include family, friends, domestic employees, etc.):

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

• List of two references – people who know me (but are not related to me) and my companion animals and have been to my home recently:

Name: _____ Phone: _____

Name: _____ Phone: _____

• I understand a Shelter representative may visit my home for a home inspection before my foster application is approved.

• I understand that if I am approved for fostering, I will also need to carefully read the “Foster Care Agreement,” which is a separate document from this “Foster Care Application.” The Foster Care Agreement represents the legal contract between a foster caregiver and Shelter.

• I understand that if I am approved to foster an animal, I must review the Foster Care Agreement before I can take my foster animal home.

• I further understand that I will be asked to agree to the terms of the Agreement and sign the Agreement before I can take my foster animal home.

• I understand that by signing below I accept full responsibility for the care and control of the above referenced fostered animals and agree to defend, indemnify, and hold harmless the Fairfield County, its agents, employees, heirs and assigns with respect to any and all causes of action, claims, demands, damages, costs and all claims for personal injury, bodily injury, lost wages, loss of earning capacity, property damage, loss of consortium, or any injuries or damages, of any nature or kind whatsoever that arises out of, or is in any way related to, the aforementioned animals, including the cost of all attorney’s fees and other expenses incurred in the defense of such actions.

• I have read this Application in its entirety, and I agree that all statements contained in this document are made by me and are truthful.

Signature: _____

Date: _____