PERRY ANIMAL WELFARE SOCIETY

Foster Care Application

I am in	iterested	in prov	viding fos	ter care for ((please ci	ircle all that	t apply):		
•Indivi	dual Pup	pies	•Litter of	Puppies	Mothe	r and Litter	•Adult Dog	g	
1.	Persona	al Data	(please	orint)					
	Name:					Home P	hone:		
	Address:					Other Phone:			
	City:			State	÷	Zip	Email	,	
2	Housel	nold Int	<u>formation</u>						
	Home facts (circle all that apply): •Rent •Own Home •Other If renting – Landlord's Name & Phone: Page 18 yrs began allow note?								
	Does your lease allow pets? Do you have a fenced yard?								
	Describe the area where your foster animals will be kept:								
3.									
	How much time can you devote to foster care? During the day?								
	In the evenings? On the weekends?								
4.	Who will care for your foster animals when you aren't home? Animal Care Information Please list current pets (continue on reverse as necessary):								
Speci	es	Breed	k	Age	Sex		Neuter/Spay	Current on Shots	
Curren	nt Vet and	d phon	e numbei	r:	<u> </u>			<u> </u>	
If none	e currentl	v. have	e vou had	l pets before	?				

What is your experience with caring for sick or orphaned animals?							
Animal Foster Care Program Agreement							
In signing this foster care agreement, you are agreeing to follow the rules and procedures established by Friends of the Shelter Dogs (FOSD) which include:							
1.	All foster animals are the property of PAWS and will be returned to PAWS when requested.						
2.	Animals in foster care will not be released to any other individual or organization unless directed by a PAWS member.						
3.	Foster caregivers will not represent themselves as anything other than a Foster Parent or Volunteer of PAWS. Any other representation to any individual group and/or organization will only be made at the consent of the management of PAWS.						
4.	No advertisement, regardless of media, will be placed on behalf of the foster animal and/or PAWS without our consent.						
5.	All decisions as to final disposition of the foster animal will be the sole discretion of a PAWS member.						
6.	All veterinary services will be pre-approved by your PAWS contact or their designee. Any unauthorized charges for medical care and services will be the liability of the foster caregiver and may not be reimbursed.						
7.	Foster caregivers will make every attempt to participate in special events and accompany the animal in order to facilitate adoption.						
8.	Foster caregivers will make their best effort to make arrangements with potential adopters to meet their foster animal at an agreed upon location and time as soon as possible upon request.						
9.	The Foster Parent will notify us of needs such as food, toys, bedding, crates, etc Purchases made by you as a Foster without advance approval by your PAWS contact or designee, may not be reimbursed.						
10	The Foster Parent is fully aware of the risks that the animal(s) you may interact with pose, has elected to interact with the animal(s) voluntarily, and agrees to hold harmless PAWS, it's agents and members for any and all damages, illness, or injury caused due to or directly by the animal in their custody.						
11	I will allow PAWS to use my name, image, voice, words, or likeness in photo(s), video, or written text in educational and promotional material. I waive any rights of privacy and/or publicity I may have in connection therewith.						

Foster Applicant Signature: _____ Date: _____

SIGN and send to:

Thanks! Or scan signed copy and email to: