



Return Completed Application to:  
**Medina County SPCA**  
8790 Guilford Road  
Seville, Ohio 44273

Today's Date: \_\_\_\_\_

## FOSTER CARE APPLICATION

We appreciate the invaluable service that foster homes provide. We want to make the most informed decision regarding which animals to place in your care. Completing this application is the best way to ensure a positive experience for both you and the animals.

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Please answer all questions to the best of your ability.**

1. Type(s) of animals you are interested in fostering? (Check all that apply.)  
Adult cats only   Pregnant cats   Mother cat and kittens   Motherless kittens  
Adult dogs   Pregnant dogs   Mother dog and puppies   Motherless puppies  
Bottle fed kittens   Bottle fed puppies   Other – Specify: \_\_\_\_\_
2. Have you fostered animals before?   No   Yes (If yes, for what organization?)  
\_\_\_\_\_
3. If not, what experience have you had with animals that would be helpful in fostering?  
\_\_\_\_\_  
\_\_\_\_\_
4. Do you live in a:   Apartment   Condo   House   Other – Specify: \_\_\_\_\_
5. Do you own your own home?   No   Yes  
\*If leasing, please provide written permission showing you are allowed pets.
6. Do you work outside the home?   No   Yes   Full time   Part time
7. How many hours a day will your fosters spend without human contact while you are working:  
\_\_\_\_\_
8. Are there any children in your household?   No   Yes  
If yes, what are their ages? \_\_\_\_\_
9. How many adults reside in your home? \_\_\_\_\_
10. Will you be able to keep foster animals separate from your own if necessary?   No   Yes
11. Where do you plan to keep your foster animals? \_\_\_\_\_  
\_\_\_\_\_

12. Do you have any pets in your household now? No Yes  
 If yes, what type and quantity? \_\_\_\_\_  
 \_\_\_\_\_  
 Are they spayed or neutered? No Yes  
 Are their vaccinations current? No Yes  
 If cat(s), are they kept indoors, outdoors, or both? Indoors Outdoors Both  
 What veterinarian do you use? \_\_\_\_\_
13. Are you willing to allow the foster care staff to routinely visit your home at an appointed time?  
 No Yes
14. Are you willing to care for sick/injured animals? No Yes  
 (Please note that almost all foster kittens will at some point come down with diarrhea and/or an upper respiratory infection and foster homes are required to treat give meds given by the shelter medical staff. If you are not prepared to do this, unfortunately we will not be able to utilize your help.)
15. It may be necessary to take your foster pet(s) to the veterinarian for care. Do you have any problems in making these appointments and transporting them to the vet? (Please note if you work you can drop them off at our shelter in the morning and pick them up after work.)  
 No Yes
16. Can you accept the fact that some animals will not survive or may have to be euthanized and that this decision is up to the Medina County SPCA (MCSPCA) staff? No Yes  
 (Animals are never euthanized for space, only for behavioral reasons, for severe sickness or for abnormalities that affect quality of life.)
17. Do you understand that anyone interested in adopting your foster animals (including yourself) must go through the standard adoption process, and approval of candidates and placement of animals is up to the MCSPCA Staff? (Of course, we welcome your referrals!) No Yes

**CAT FOSTERS ONLY:**

18. If you plan on adopting any of the cats you foster, once adopted where will they be kept?  
 Indoors Outdoors Both (Please explain your answer) \_\_\_\_\_  
 \_\_\_\_\_

**DOG FOSTERS ONLY:**

19. If you have a fenced in yard, how high is the fence? \_\_\_\_\_ If your yard is not fenced, how do you contain the dogs to your property (including your own)? \_\_\_\_\_  
 \_\_\_\_\_

I have answered the questions above truthfully and completely. I understand that although Medina County SPCA takes reasonable care to screen animals for foster care placement, it makes no guarantee relating to the health of an animal, behavior, or actions. I understand that I receive foster care animals at my own risk and can reject or return any animals for which Medina County SPCA has asked me to provide care. I indemnify and hold Medina County SPCA harmless from all liability arising out of any and all claims, demands, losses, damages, actions, judgment of every kind, and description which may occur to be suffered by me, members of my household, or any third parties by reason of activities arising out of this agreement

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

# FOSTER CARE AGREEMENT & LIABILITY RELEASE

This agreement is between the Medina County SPCA, a non-profit, Ohio Corporation operating as a county humane society pursuant to O.R.C. Chapter 1717 and

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Fostering is a responsibility and a privilege. The policies below are created to ensure the safety and health of the animals. Please read the policies below and understand these must be agreed to and met in order to foster for the Medina County SPCA.

Upon reading the statements, please initial that you understand and are willing to comply with these policies.

\_\_\_\_\_ I agree to permit a MCSPCA representative to visit my home and inspect all animal(s), medical records and observe where the foster animal(s) will be kept.

\_\_\_\_\_ Upon request by the MCSPCA, I will return the animal(s) to the MCSPCA within 24 hours or less.

\_\_\_\_\_ If a foster animal is seriously injured, dies or experiences any serious health problem, I will call the MCSPCA immediately and get instructions from the staff.

\_\_\_\_\_ I will call the MCSPCA staff for approval before taking the animal(s) to an approved veterinarian.

\_\_\_\_\_ I will assume all financial responsibility for the foster animal(s) if I take them to any veterinarian other than those approved by the MCSPCA or if I take them without pre-approval.

\_\_\_\_\_ The MCSPCA will provide food, litter and any other supplies when available. Any additional expenses incurred will be my responsibility unless approved by the Director of Operations before purchasing.

\_\_\_\_\_ I may not sell, give away or otherwise transfer ownership or possession of the animal(s) to another party without written permission by the MCSPCA. If I can no longer care for the animal(s), it must be returned immediately to the MCSPCA.

\_\_\_\_\_ I understand that I will not be contacted for my consent if the situation should arise that the foster animal(s) are deemed unfit for adoption and must be euthanized.

\_\_\_\_\_ I agree to adopt out an animal ONLY with specific permission from the Director of Operations.

\_\_\_\_\_ I agree to keep the animal(s) confined or securely tethered at all times and shall not allow the animal(s) to run free outdoors.

\_\_\_\_\_ I understand that some animals may have been seized as part of a cruelty investigation. These animals are potentially evidence in a criminal case and are not property of either the MCSPCA or the Foster Home. This means that a court could order the animal(s) to be returned to the defendant/owner. I agree to comply with any court order directed to the MCSPCA.

\_\_\_\_\_ I accept responsibility for the care and well-being of the animal(s) I accept to foster until the animal is adopted or returned to the MCSPCA.

\_\_\_\_\_ I understand that these animals have been rescued from situations of neglect and/or abuse, and although MCSPCA may provide some information about an animal, the MCSPCA can never guarantee its health, behavior or disposition. I therefore hold harmless and will indemnify the MCSPCA against all liability and claims for losses and damages to persons or property in connection with the animal(s), including but not limited to damages to damages from animal bites/attacks and claims of negligence on part of the MCSPCA. I waive any remedy for damages which is not specifically contained in this Agreement.

\_\_\_\_\_ I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and an agreement between myself and MCSPCA.

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_