

Return Completed Application to:
Medina County SPCA
245 S. Medina Street
Medina, Ohio 44256



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: _____

Day Phone: _____ Evening Phone: _____

Cell Phone: _____ Work 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.)
 - Cats Pregnant cats Mother cat and kittens Motherless kittens
 - Dogs Pregnant dogs Mother dog and puppies Motherless 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 have any experience training and working with dogs with behavioral issues?
 No Yes If yes, please describe: _____
- 5) Do you live in a: Apartment Condo House Other – Specify: _____
- 6) Do you own your own home? No Yes
*If leasing, please provide written permission showing you are allowed pets.
- 7) Do you work outside the home? No Yes Full time Part time
- 8) Are there any children in your household? No Yes
If yes, what are their ages? _____
- 9) Do any members of your household have allergies? No Yes If yes, please describe

- 10) How many adults reside in your home? _____
- 11) How many hours per day will your foster animals be without adult care? _____

- 12) Do you have a fenced yard? No Yes If yes, what height is it? _____
- 13) If no fence, how are your dogs exercised outside? _____
- 14) Will you be able to keep foster animals separate from your own if necessary? No Yes
- 15) Where do you plan to keep your foster animals? _____
- 16) What will you do to find your foster animal if it becomes lost? _____

- 17) Do you have any pets in your household now? No Yes
If yes, what type and quantity? _____

What are their ages? _____

Are they spayed or neutered? No Yes

Are their vaccinations current? No Yes

If dog(s), are they currently licensed? No Yes

If dog(s), what breed(s) are they? _____

If cat(s), are they kept indoors, outdoors, or both? Indoors Outdoors Both

What veterinarian do you use? _____

- 18) What pets have you had in the last 5 years and where are they now (if any)? _____

- 19) Are you willing to allow the foster care staff to routinely visit your home at an appointed time?
 No Yes

- 20) Are you willing to care for sick/injured animals? No Yes

- 21) Are you willing to take a dog that is not yet housebroken? No Yes

- 22) 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

- 23) 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

- 24) 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

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: _____

Print Name: _____ Date: _____

Signature: _____