

# MOSTLY MOTT'S ANIMAL RESCUE, INC.

FOSTER APPLICATION

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

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

Street \_\_\_\_\_

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

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

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

Date of Birth: \_\_\_\_\_ Driver's License No.: \_\_\_\_\_ State: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you presently own any pets?  Yes  No

Pet Name(s) \_\_\_\_\_

What Kind? \_\_\_\_\_

Up to date on vaccines? \_\_\_\_\_ Spayed/Neutered \_\_\_\_\_

Veterinarian you use \_\_\_\_\_ phone# \_\_\_\_\_

Do you own any large snakes or guard animals?  Yes  No

If yes, what? \_\_\_\_\_

Do you own your own home?  Yes  No

Do you have a fenced yard?  Yes  No

❖ What type of fence?  chain link  wood  other

❖ How high is the fence? \_\_\_\_\_

Where will you keep the dog while you are not home?

\_\_\_\_\_

How long will the foster(s) be left alone per day?

\_\_\_\_\_

Are there children presently living in the home?  Yes  No

Ages: \_\_\_\_\_

Have you ever fostered with a rescue before?  Yes  No

If yes, what rescue? \_\_\_\_\_

Have you ever surrendered a pet before?  Yes  No

If yes, why? \_\_\_\_\_

Is there a limit to the length of time you can foster?  Yes  No

❖ If so, what is the a time limit? \_\_\_\_\_

Do you mind if a potential adopter comes to your home to look at the dog?  Yes  No

Are you able to provide trips to the vet for office visits?  Yes  No

Are you willing to bring your foster pets to adoption days at pet stores?  Yes  No

If so, are you willing to stay and help?  Yes  No

I have read the above application and I certify the information I have given to be accurate and true.

\_\_\_ initial

I understand that any misrepresentation of the above information authorizes Mostly Mutts Animal Rescue, Inc to deny application and/or reclaim any animal that I have in my care. I understand that the pet in my care is the property of Mostly Mutts Animal Rescue, Inc and any decisions regarding the pet and the pet's future is that of Mostly Mutts Animal Rescue, Inc.

\_\_\_ initial

I acknowledge that Mostly Mutts Animal Rescue, Inc cannot guarantee any foster animals against disease, parasites or destructive behavior. I will not hold Mostly Mutts Animal Rescue, Inc. responsible, nor seek any compensation for damages, medical fees or other liabilities incurred by the foster.

\_\_\_ initial

I understand any bites or damages caused by the pet I am fostering is to be immediately reported to Mostly Mutts Animal Rescue, Inc.

\_\_\_ initial

Mostly Mutts Animal Rescue Inc., reserves the right to request criminal background information on prospective fosters.

I further agree to be personally responsible for the humane housing and care of the animal(s) I am fostering.

Signature \_\_\_\_\_ Date \_\_\_\_\_

MMARI Representative

Signature \_\_\_\_\_ Date \_\_\_\_\_

Return completed application to:

jinjeri@yahoo.com

Or

Mostly Mutts Animal Rescue, Inc.

P. O. Box 312

Ballwin, MO 63022-0312

