



FOSTER AND FOSTER TO ADOPT APPLICATION

I am applying to foster an animal from Fishtails Animal Rescue.

Name of specific animal, if any: _____

Are you interested in potentially adopting this foster pet? Yes No

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Primary Phone: _____ Alternate Phone: _____

Email: _____ Date of Birth: _____

How long have you lived at your current address? _____ If fewer than 3 years, please provide previous address: _____

You must have a valid driver's license or other government-issued photo ID to adopt a pet.

ID type: _____ ID number: _____

How many other adults (18+) live in your home? _____ Please list all adults' full names below:

How many children live with you? _____ Please list kids' ages: _____

Is anyone in your household allergic to animals? Very allergic Mildly allergic No allergies Unsure

Do all members of your household agree on adopting? Yes Not sure It's a surprise.

Do you own your home? Yes No--If you rent, provide landlords name and phone number:

Have you had a pet before? (check all that apply):

- I currently have a pet Within the last 5 years More than 5 years ago As a child/growing up
 Never--this will be my first pet There are currently pets in my home but they aren't mine

Have you ever (check all that apply):

- Given/sold a pet to another person Given a pet to a shelter Had a pet run away
 Had a pet die in your care Had to euthanize a pet



Please list all current and former pets:

Pet's Name	Species (dog/cat/etc.)	Breed (Pit/Lab/DSH/etc.)	Spayed / Neutered?	Age	Years Owned (ex. 1995-2001)	Currently in home?
			Yes / No			Yes / No
			Yes / No			Yes / No
			Yes / No			Yes / No
			Yes / No			Yes / No
			Yes / No			Yes / No

Veterinary Practice(s) Used (include name of person on file with veterinarian, if not you):

Where will this pet be allowed in your home (check all that apply)?

- Inside only
 Inside with free access to outside
 Inside with supervised time outside
 Outside only
 Crate
 Basement
 Garage
 Other: _____

Under what circumstances, if any, would you need to return the pet to Fishtails Animal Rescue?

- New baby
 Not enough time for pet
 Sheds
 Become allergic
 Scratches furniture
 Vet costs too expensive
 Not allowed in new living space
 Becomes aggressive
 Litter box issues
 Moving too far to bring pet with me
 Too playful / jumps on furniture, counters
 Other: _____

Is there anything else you think we should know?

Please read and initial each of the following items:

- _____ I certify that I am fostering this pet for myself, and that I am permitted to have this pet in my home.
- _____ I understand that the foster to adopt agreement is for 1 month. At that time this pet would need to be formally adopted.
- _____ The information I have provided on this application is true to the best of my knowledge. I understand that if I willfully provide false information, my application may be denied.
- _____ I understand that I as the foster cannot adopt out or give the pet away. All potential interested adopters must go through Fishtails Animal Rescue.
- _____ I understand that Fishtails Animal Rescue does not provide food, litter, etc.

Signature of Applicant: _____ **Date:** _____