



Foster Application Form

Contact Information

Full name: _____

Occupation: _____

Address: _____

How long at this address: _____

Primary Phone: _____ Best time to call: _____

Email address: _____

Family & Housing

Do You: RENT ☐ OWN ☐

If you rent, please provide information from lease regarding pets' policy and provide full name/contact information for your Landlord:

(Providing this information you are allowing us to call your landlord. Please call your landlord and ask them to authorize the release of information.)

How many children (ages)? _____ How many adults? _____

What type of home do you live in: single family, town home, apartment, farm, etc.?

Is the yard secure and fully fenced? ___ Yes ___ No How big is the yard? _____

What is the fence constructed of and how high is it? _____

Anyone in the family have allergies to dogs? ___ Yes ___ No Is everyone in agreement to foster a dog? ___ Yes ___ No

Other Pets

What pets do you have currently (specify type, age and number)?

Are these pets up to date on vaccines? ☐ Yes ☐ No

Are these pets spayed/neutered? ☐ Yes ☐ No

If not why?

Have you owned animals in the past?

☐ Yes ☐ No

What kind of pet(s) were they?

What happened to them?

Have you ever given a pet away? ☐ Yes ☐ No

If so, why?

Veterinarian

Veterinarian's name:

Clinic Name:

Clinic Address:

Clinic Phone:

Is this your current veterinarian? ☐ Yes ☐ No

Have you had any other veterinarians for previous animals?

☐ Yes ☐ No

Please provide their information:

(Providing this information you are allowing us to call your vet. Please call your vet and ask them to authorize the release of information.)

Do You Have A Preference Regarding the Dog You Foster?

Desired age:

Desired breed:

Desired size:

Desired sex: ☐ Spayed Female ☐ Neutered Male ☐ No preference

"Fostering Dog and Community"
www.direwoofs.org