



## FOSTER CARE APPLICATION

### Why Foster?

Every day we receive calls from people in the community with feral or stray cats that need to find a safe place to relocate and needed medical attention. The only way that we can save these animals is with the help of foster homes. As a foster, you provide a safe, loving home for pets in our program while we help them find their forever home. You can help us gain valuable information about the pet, give them much-needed attention and enrichment, and ultimately help us make the best match with a new family.

### What are the general responsibilities of being a foster family?

- Check in regularly with your coordinator
- Provide a safe, clean, caring environment
- Provide food, water, litter, toys/enrichment, and shelter
- Provide exercise and socialization as appropriate
- Monitor any medical and/or behavioral problems
- Transport to/from any necessary vet appointments
- Transport to/from offsite adoption events
- In certain cases, especially for bottle baby kittens, the foster pets require isolation from other animals in the home for 10-14 days or longer, if the foster pet is sick

If this is something you can provide, please fill out the form below: **TODAY'S DATE:** \_\_\_\_\_

### Contact Information

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

Co-Applicant Name/Relationship: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

IF APPLICABLE Work phone: \_\_\_\_\_ How long with this employer? \_\_\_\_\_

### Family Information

How many people currently reside in your household? \_\_\_\_\_  
No. of adults in household? \_\_\_\_\_ Ages? \_\_\_\_\_  
Any children in the household?  Yes  No List ages: \_\_\_\_\_  
Does everyone share your interest in fostering? \_\_\_\_\_ Anyone allergic to cats? \_\_\_\_\_

### Home Information

Where do you live?  Apartment  Condo  Farm  Mobile home  Townhouse  House  
Do you own or rent your home? \_\_\_\_\_ How long have you lived at your current address? \_\_\_\_\_  
Number of rooms: \_\_\_\_\_; other pertinent info: \_\_\_\_\_  
If you rent, landlord's name & phone #: \_\_\_\_\_  
Do you have the permission of your landlord to have a cat?  Yes  No if yes how many: \_\_\_\_\_  
Is a pet deposit required? \_\_\_ Yes \_\_\_ No Paid? \_\_\_ Yes \_\_\_ No \_\_\_

### Pet Information

**Please list your current and former pet(s) – Use back of paper if you need more room to write.**

Name	Age	Species(dog/cat),	Gender	Breed

Name & phone number of your current veterinarian \_\_\_\_\_

Are all your current pets spayed/neutered? \_\_\_\_\_

Are your pets' vaccinations up to date?  Yes  No Flea preventive treatment?  Yes  No

Have your cats been tested for feline leukemia and FIV? \_\_\_\_\_ Results: \_\_\_\_\_

### Foster Preferences and Duties

Please check the type of animals you would be interested in fostering:

\_\_\_\_\_ Newborn litter of kittens (*orphaned, to bottle feed and wean; This requires round-the-clock care as kittens need to be bottle-fed every couple of hours. We will provide training.*)

\_\_\_\_\_ Mother & kittens

\_\_\_\_\_ Single Kitten (7-12 weeks)

\_\_\_\_\_ Special needs – medical \_\_\_\_\_ Special needs - behavioral

\_\_\_\_\_ Adult female/male

How long are you willing to foster a particular animal? \_\_\_\_\_

Who will be responsible for the cat's care? \_\_\_\_\_

Where the cat will stay during the day, at night, and when you aren't home: \_\_\_\_\_

Are you willing to meet with a potential adopter either at your home or a WACCC location? \_\_\_\_\_

Do your current pets get along with other cats? \_\_\_\_\_ If you think there may be a conflict, please describe how you will keep the foster cat separate from your family pet(s): \_\_\_\_\_

### **Foster Care Agreement**

- By agreeing to foster in partnership with WACCC (WACCC) I agree to the following:

**Pet's Health and Disposition:** WACCC cannot guarantee the health or disposition of any foster animal. We do not have past records for these animals and there are some risks associated with taking in foster animals. Family pets will be current on all shots and foster pets will be kept separate from family pets, for a minimum of 7 (10-14 for cats) days for the protection of all animals!

I agree to be fully responsible for the safety and wellbeing of the foster pet. I will provide a safe, loving, humane environment with adequate food water and shelter at all times. I will adhere to all state and local animal laws. I will promptly notify WACCC of any signs of illness, behavioral issues or concerns, an inability to continue to foster, if the cat becomes lost, and/or if the cat bites someone.

**Veterinary Services:** We pay for all approved veterinary services. This includes: antibiotics, vaccines, spay/neuter surgery, treatment for flea and tick prevention, deworming or other illnesses. If you are able/ willing to transport the cat for any necessary veterinary care this would be appreciated. While you are welcome to use your preferred vet for treatment at your cost, we are not able to reimburse any medical expenses that we have not approved beforehand.

**Adoption Events:** Your foster cat will be eligible to attend adoption events after one week of being in their new home and if they are medically stable. Fosters are asked to attend with their foster if the event is appropriate for their cat's personality.

**Out-of-State Transport:** We often partner up with out of state adopters to help more cats find their forever homes as well as help create more space to save more lives here in Cumberland County. If your cat is adopted out of state and scheduled for transport, we will notify you as soon as the adopter confirms with us. Once confirmed you will be notified of a date and time for a vet check and a date and time for drop-off.

**Transfer of Animals:** Cats cannot be transferred to the custody of another person, shelter, or other entity without prior consent and permission of WACCC. I agree to not place this pet in another home without the written or verbal authorization from WACCC, whether it be temporary or permanent.

**Return of Animals:** All the pets in the WACCC foster program are the property of WACCC and must be returned within 24 hours of request. I agree that I am fostering this pet for WACCC and that I do not have any right of ownership over my foster animal. I further agree that WACCC rights in and to my foster pet are superior to mine. I agree to provide the Authorized Representative, or his/her designate access to my home and property to check on my foster pet, at a scheduled time while I am in possession of my foster pet.

**Personal or Property Damage and/or Injury:** I agree that accidental animal bites or other injuries to humans and other animals do occur, and agree to hold harmless and indemnify, and protect WACCC from any claim or suit filed by someone as a result of such incident. In addition, WACCC will not be responsible if animal should damage or destroy property belonging to Foster Caregiver, Foster

Caregiver household, or others, or if the animal shall transfer any disease, internal or external parasites to other animals and people in Foster Caregivers household.

I understand that if I am approved for fostering, this declaration represents a legal contract between me as the foster home caregiver and WACCC. I understand that if I am approved to foster an animal, I must abide by this agreement and that this agreement applies to any and all animals that I foster with WACCC.

### References

*Since you have expressed interest in fostering, references are required.*

*Be sure to ask your reference before listing them so they will be alerted to our contacting them.*

*One reference may NOT be a family member.*

**Name/relationship:** \_\_\_\_\_

**Text, phone or email:** \_\_\_\_\_

**Name/relationship:** \_\_\_\_\_

**Text, phone or email:** \_\_\_\_\_

**Accuracy of Information:** By signing this form, I/we acknowledge that all information on this form is true and correct. I/we understand that any misrepresentation of fact may result in WACCC refusing adoption privileges to me/us. If my/our request for adoption is approved and later WACCC discovers the above information is not true or correct, WACCC reserves the right to remove the adopted cat from my home/farm. WACCC reserves the right to refuse adoption to any person for any reason.

I agree to the above terms and conditions accurate to the best of my/our knowledge.

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

**Return this form to: wildaboutcatsCC@gmail.com**

Note: Submission by email will serve as signature agreement