



3107 North 20<sup>th</sup> Street Sheboygan, WI 53083 (920) 458-2012 AdoptSheboyganCounty.org

**FOSTER APPLICATION**

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_ M.I.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

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

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Driver's License: \_\_\_\_\_ OR-Photo I.D.: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Home Phone Number: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_

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

**\*List other adults (18 years or older) living in your household (provide first & last names, middle initial & date of birth)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of Children living with you \_\_\_\_\_ Ages: \_\_\_\_\_

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Do you: Rent  or Own  Is it a: House  Condo/Town Home  Mobile Home  Apartment

Landlord name & phone number: \_\_\_\_\_

**LIST ALL PETS CURRENTLY LIVING IN YOUR RESIDENCE**

<i>Pet's Name</i>	<i>Pet Type &amp; Breed</i>	<i>Sex</i>	<i>Spayed or Neutered?</i>	<i>Kept Where?</i>	<i>Age of Pet?</i>	<i>Microchipped?</i>
_____	_____	_____	yes _____ no _____	In _____ Out _____ Both _____	_____	_____
_____	_____	_____	yes _____ no _____	In _____ Out _____ Both _____	_____	_____
_____	_____	_____	yes _____ no _____	In _____ Out _____ Both _____	_____	_____
_____	_____	_____	yes _____ no _____	In _____ Out _____ Both _____	_____	_____

List Present Veterinarian/Clinic: \_\_\_\_\_

Under what name (including maiden name) are/were your pets listed? \_\_\_\_\_

Have you ever fostered animals before for any organization(s)? Yes  No

If Yes, for what organization(s) and when? \_\_\_\_\_  
\_\_\_\_\_

Please describe the general area where the animal(s) you are fostering will be kept: \_\_\_\_\_  
\_\_\_\_\_

How many hours per day will the animal be without human supervision? \_\_\_\_\_



I am interested in/willing to foster the following animal types:

Feline  Canine  Other

Please check all that apply for each category:

I am interested in the following types of foster:	I am interested in the following types of dogs:	I am interested in the following types of cats:
<input type="checkbox"/> Healthy Foster	<input type="checkbox"/> Neonate puppies without mother	<input type="checkbox"/> Neonate kittens without mother
<input type="checkbox"/> Medical Foster	<input type="checkbox"/> Small Litter	<input type="checkbox"/> Small Litter
<input type="checkbox"/> Bottle Fed/Orphaned	<input type="checkbox"/> Large Litter	<input type="checkbox"/> Large Litter
<input type="checkbox"/> Parent with Litter	<input type="checkbox"/> Mother with Litter	<input type="checkbox"/> Mother with Litter
<input type="checkbox"/> Behavioral	<input type="checkbox"/> Adult Dog	<input type="checkbox"/> Adult Cat

Do you have a preference in sex of foster? Male  Female  No Preference

What size dog are you willing to foster? (Check all that apply) Small  Medium  Large

Please describe the type of dog / cat you are willing to foster (Please include breed, coat length, personality traits, energy level, etc. We always want to make sure we have the best fit for our foster homes.

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*HSSC staff will inform you of any medical treatments to be administered, the anticipated length of the foster-care period, the objectives of each particular placement (restoring to health, rearing to adoptable age, socialization, etc.), and any other restrictions or expectations we may have. You will be expected to keep the animal safe and secure, return it to HSSC when requested to do so. The foster parent is responsible for transporting the animals to and from HSSC for veterinary appointments, surgery, behavior evaluations, vaccinations, etc. The foster parent may also be responsible for transporting the animal to and from adoption events, and to off-site training classes.*

*HSSC retains ownership of all animals placed in foster care, and will make all decisions regarding the adoption & placement of the animals fostered.*

*I have read and understand the statements above. I certify that all the information contained in this application is true and correct. I understand that although HSSC takes reasonable care to screen animals for foster care placement, it makes no guarantees relating to the animals' health, behavior or actions. I understand that I receive foster care animals at my own risk. I acknowledge that HSSC is not responsible for any property damage or personal injury suffered by me, members of my household, including my own animals, or any third parties during a foster placement, and I assume liability to provide adequate controls to prevent such damage or injury.*

Signature: \_\_\_\_\_

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