



FOSTER APPLICATION

Please fill all fields and check appropriate boxes

PERSONAL INFORMATION

Name: _____

Address: _____

City: _____ Postal Code: _____

Cell Phone: _____ Home/ Work Phone: _____

Email Address: _____

HOUSEHOLD INFORMATION

Do you: Own Rent Live with Family

Type of housing: Single Family Home Town House Apartment

If renting, do you have the landlord's consent to have pets: Yes No

Landlords Name: _____ Landlord's phone number: _____

How many children live at home: _____ Ages: _____ How many adults: _____

Are there children who regularly visit: Yes No If yes, what age: _____

OTHER ANIMALS

What animals do you currently have in your home: (Species, age, spayed/neutered)

Are they up to date on their vaccines: Yes No

If no companion animals at this time, please tell us about your experience with animals in the past:

Do you have a space you can dedicate specifically to a foster cat or kittens: Yes No

Can the area be easily disinfected: Yes No

Please describe:

FOSTERING

How did you hear about our Foster Program: _____

Are you prepared to say goodbye to the foster cat/kittens ready for adoption: Yes No

Please indicate which situations you are most interested in?

- Under socialized feral kittens
- Mothers with nursing kittens
- Orphaned babies – (requiring time consuming bottle feeding & training)
- Weaned kittens - eating on their own
- Special needs cats/kittens (maybe injured, ill, geriatric, requiring medication)

Do you have previous foster experience:

Do you agree to a home check prior to the placement of cats or kittens to review the proposed plans and setting for foster animals: Yes No

Any additional comments that may be helpful for placing animals in your care:

PERSONAL REFERENCES

Name: _____ Phone # _____ Years Known: _____

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I understand that I receive foster care animals at my own risk and can reject or return any animals, which Cats of Salt Spring Rescue Society has asked me to provide care for. I understand that although Cats of Salt Spring Rescue Society has taken reasonable care to screen animals for the foster care program, it makes no guarantee relating to the animals' health, behavior or actions. I indemnify and hold the Cats of Salt Spring Rescue Society free and harmless from all liability arising out of any and all claims, demands, losses, damages, action, judgment of every kind and description which may occur to or be suffered by me, members of my household, or any third parties by reason of activities arising out of the agreement.

APPLICANT: _____ **DATE:** _____

Print application and mail to:

OR

Save and email to:

Cats of Salt Spring Rescue Society
PO Box 837 Ganges, Salt Spring Island
British Columbia, V8K 2W3

info@catsofsaltspring.com

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