

Foster Application



Applicant's Name _____

Address _____

Date of Birth _____

Email _____ Phone _____

Drivers License # and Issuing State _____

Are there any children in your home? If yes, how old are they? _____

Do you have any experience caring for animals or special training? (Not required.) _____

Have you ever fostered before? If so, through which organization? _____

Do you currently have any other pets? If yes:

of Dogs _____ Ages _____ Spayed/Neutered? _____

of Cats _____ Ages _____ Spayed/Neutered? _____

Other _____ Ages _____ Spayed/Neutered? _____

Are they current on all vaccines, flea and heartworm prevention? _____

Which animal clinic do you use? _____

What is the animal clinic's phone number? _____

What types of animals are you interested in fostering? (Please Circle.)

KITTENS CATS PUPPIES DOGS OTHER

Do you own or rent your home? _____

If renting, do you have permission to foster? _____

Landlord's Name & Number _____

Do you have a fenced-in yard? (Please Circle.) YES or NO

Where will the animal be kept at night/when no one is home?

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Animal Adoption Center
of
Blount County

By signing this application, I agree to the following:

1. I agree to return the foster animal(s) to the Animal Adoption Center of Blount County at the end of the foster term or if I am no longer able to care for the animal.
2. I understand that the animal shall remain the sole property of AAC and that **I do not have the authority to place the animal in other homes or with other individuals during my foster term.**
3. I agree to provide the animal with good care, including but not limited to food, water, shelter, grooming, training, and medication when required. I understand that I will not be reimbursed for supplies purchased but can always keep receipts for my own personal tax records as a tax-deductible donation.
4. I understand that AAC is responsible for limited medical supplies or medical expenses during the foster term.
5. I understand that once I return the animal from foster care, there is no guarantee they will be adopted.
6. I assume full responsibility for all human or animal injuries, and/or behavioral/psychological problems incurred while the animal is in my care, home, environment. I will not hold the Animal Adoption Center of Blount County responsible for any problems to my pets, my family, my guests, my property, or myself.

Signature _____ **Date** _____

Shelter Representative _____