

**CAT FOSTER APPLICATION**

P.O. Box 1143 / 7894 Ocean Gateway Easton, MD 21601

website: [www.talbothumane.org](http://www.talbothumane.org) email: [info@talbothumane.org](http://www.info@talbothumane.org)

phone: (410)-822-0107 fax: (410)-822-7619

*Applicants must be at least 21 years of age.*

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\*DOB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City:\_\_\_\_\_\_\_\_\_\_\_\_\_County:\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Do you *Own* or *Rent*? \_\_\_\_\_\_\_\_\_ If *Rent* please provide landlord’s name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Landlord’s Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever fostered before? \_\_\_\_\_\_ if yes, please list organization(s) and what animals you have fostered\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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How many hours a day will you be away from home? (*this includes work, meetings, family outings, etc.*) ­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Who will be the primary caregiver for the foster animal(s)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long do you expect to care for a foster pet? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many people live in the household? \_\_\_\_ and are they all over the age of 18? NO YES

**\*Please list all “current” pets living in the home:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Species** | **Age** | **Sex** | **Altered****(Yes or No)** | **Veterinarian** | **Breed** |
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**\*Please list all “previous” pets owned in the past 7 years:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Species** | **Age** | **Sex** | **Altered****(Yes or No)** | **Veterinarian** | **Breed** |
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**\*Phone # of Veterinarian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*\*\*Although we at Talbot Humane screen all animals for health and temperament when they arrive at the shelter, please be aware that a quarantine period should still be observed when animals are brought into your home, especially if you have pets of your own. This is for the protection of your pets as well as the animals in foster care. Talbot Humane will not be held responsible for the cost of treating personal pets if they become ill or injured.**

|  |  |  |
| --- | --- | --- |
| **Please check (Yes) or (No) to all that apply:** | **Have experience with?** | **Willing to foster?** |
| **Adult cats** |  |  |
| **Kittens** |  |  |
| **Nursing mother with kittens** |  |  |
| **Bottle feeding kittens** |  |  |
| **Special needs cats (geriatrics, injured, administering meds, etc.)** |  |  |
| **Stress in shelter adult cats (longer term commitment may be required)** |  |  |

Where will you house the cat/kittens when not under your direct supervision? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you prepared to “cat proof” your home, or at least the area in which the cat will be permitted? YES NO

If you have cats, are they allowed outside? YES NO

If you have cats, are they accustom to other cats? YES NO

If you have dogs, are they accustom to cats? YES NO

If you have children do, they understand the “do’s” and “don’ts” of handling a new cat(s)? YES NO

Do you plan on allowing them to participate in the care of your foster cat(s)? YES NO

**\*NOTE: We cannot guarantee placement for your foster cat although we will exhaust all efforts. If we determine that due to illness or temperament issues the foster dog cannot stay in the adoption program any longer, would you like to be notified? *YES NO***

**If we cannot reach you within 48 hours a decision will be made without your input.**

**By signing below, I certify that the information on this application is true and correct to the best of my knowledge. I give permission for Talbot Humane and their agents to verify all the information it contains.**

***Signature*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Date*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**