



Prattville Autauga Humane Society
1009 Rueben Road, Prattville, AL 36067
Phone: 334-358-2882

Foster Application

Contact Information

Name: _____ Age: _____ (you must be 21 or older)
Address: _____ City: _____ State: _____
Zip: _____ Home phone: _____ Cell: _____ Work: _____
E-mail address: _____ Occupation: _____

Home Environment: (please put an "x" in the appropriate space)

What type of home do you live in? House ___ Mobile home ___ Apartment ___ Duplex ___

Do you: own ___ rent ___? If you rent, are pets allowed? Yes ___ No ___

Do you have a fenced-in yard? Yes ___ No ___

Please list the names and ages of all other persons residing in the home in which the animal(s) will be fostered.

Is everyone in the household agreeable to your interest in fostering? Yes/No

Who will be the primary caregiver of this animal(s)? _____

Will you consent to a home visit by the shelter manager or member of the Board of Directors? Yes/No

Please list all of the animals you currently own:

Breed: _____ Age: _____ Sex: _____ Weight: _____ Altered? Yes/No
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Are all animals in your home current on vaccinations and/or Rabies? Yes No

Are all of your dogs current on their Heartworm Prevention? Yes No If not, explain below:

Please provide information about past pet ownership for the last 10 years. If you have never owned pets, skip this section.

Breed: _____ Name: _____ What became of this pet? _____

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Fostering Questionnaire: What animals are you interested in fostering?

Dog ___ Cat ___ Puppy ___ Kitten ___ Mother with kittens/puppies ___ Litter of puppies/kittens ___

Special needs animals _____ Animals with medical needs/conditions _____

Are you willing to foster animals that need assistance with behavior issues? ___ Socialization? ___

House-training? _____

Where will the animal be kept during the day? _____

Where will the dog sleep at night? _____

Are you able to give the animal the required care needed to maintain optimal health and adoptability?

Yes No

Do you have the supplies needed to properly foster this animal? (i.e. crate, litter box, food) If not, please list your specific needs below.

Discuss below any previous animal fostering experience.

References: Please provide one personal reference below. This person should be able to speak about your activities and relationships with animals.

Name: _____ Phone: _____ Relationship: _____

Veterinarian: _____? Phone: _____ May we contact your vet? Yes/No

Foster/Shelter Agreement and Contract

PAHS reserves the right to approve or deny foster application based on the suitability of the foster's home and foster's experience for the requested pet. PAHS further agrees to reclaim fostered pets for any reason at any time. PAHS staff is available to support the foster at all times. In the event that the foster has any questions, needs, concerns, PAHS can be contacted at 334-358-2882 during regular business hours: Monday-Saturday 11am-4pm. For after hours contact Claudia Rigsby (phone)? Or (Need a second contact person here). Medical emergency? (insert info here)

The foster agrees that the pet remains sole property of PAHS until such time that the pet is officially adopted. The foster is not to adopt any of the foster animals out to interested individuals, but will provide the interested person's contact information to PAHS. A foster agrees to provide all updated contact information to PAHS anytime he/she is in possession of an animal that belongs to PAHS.

The foster agrees to provide compassionate and loving care to include, but not limited to, nutritious food, clean water, adequate shelter, and any transportation that is required at their expense. Some items that are donated to PAHS may be available for the foster's use at the discretion of the PAHS shelter manager.

All of our animals receive a health check, vaccinations, de-worming, and a temperament test before going to his or her foster home. The foster should realize that the animal may have been exposed to illness or disease, that some illnesses or diseases may be transmitted to other pets, and that some conditions (i.e. ringworm, sarcoptic mange) may also be passed on to humans. PAHS will make every attempt to ensure that any potential illnesses are disclosed to the foster; however, it is possible that the animal may be incubating an illness and that symptoms may not manifest themselves until the pet is in the foster's home.

The foster agrees to keep the foster animal(s) safe and to limit exposure to other animals for health purposes. Foster animals should be contained at all times and are not permitted to roam outside the foster family's property. The foster animal will be under control at all times if or when the animal is off of the foster's property.

Foster understands that any medical or behavioral concerns **MUST** be brought to the attention of PAHS for evaluation and treatment. If the foster seeks independent veterinary care or behavior modification, the foster is responsible for those costs. The foster will not take the animal(s) to a veterinarian without prior approval from PAHS unless it is a medical emergency and PAHS cannot be reached. The foster agrees to contact PAHS as soon as possible after seeking emergency veterinary care.

The foster agrees to take animal(s) to scheduled Pet Adoption Days or schedule with PAHS staff for transportation if foster is unavailable to attend the adoption event.

By signing this contract the foster hereby releases and continuously discharges PAHS, its officers, agents, elected officials, and employees from and against any and all liability, costs, actions, claims, and/or lawsuits involving death, illness, bodily injury, and/or property damage caused by any animal that is being fostered.

Foster Signature

Date

Shelter Manager Signature

Date