

Dog Foster Application Form

Applicant's Name _____ Age _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____

Employer _____ Work Phone _____

Size of dog preferred SM _____ MED _____ LG _____

1) Please explain your dog experience to date: What pets have you had? What type, how many and for how long have you fostered dogs in the past? For which organization? _____

2) Please fully describe where you will keep any fostered animals.

3) How much time will you spend with each foster animal daily? _____

How much time spent exercising daily? _____

4) How long will the dog(s) be alone daily? _____

5) What will you do with dogs while you are away on vacation or out of town? _____

6) Do you have a fenced yard? _____ If so, what kind and how high? _____

7) Will the dog ever travel with you in a pickup truck? _____ If so, where will the dog ride? _____

8) If behavior problems do occur, are you committed to working with the dog to correct the problem? _____ Including obedience training? _____

If you own or house other animals, please provide information about them:

Type of Animal	How many?	Breed(s)	Vaccines current?	Vaccines given	Where kept? Inside, outside, garage

9) Do you rent? ___ Landlord's name and phone number _____ Or own ___

10) If you currently have a veterinarian, please list:

a) Name of vet and clinic _____ Phone _____

b) Name of vet and clinic _____ Phone _____

Thank you for your interest in fostering dogs for LAR. One of our dog coordinators will call to chat about our needs, process and protocols.

Signature _____ Date _____

Signature _____ Date _____