

If you are interested in becoming a foster parent, please complete this form and return it to the AWL. You may email it to info@awlfc.org or mail (or drop it off) to our office at 1202 East Patrick Street, Suite 13A, Frederick, MD 21701.

Please be patient as it may take us a few days to acknowledge that we received it and to set up an interview.

Thank you!

UNIVERSAL FOSTER CARE APPLICATION AND CONTRACT

Name:				
Date:				
Address:				
Home Phone):	Work Phone	:	
Cell Phone:		Preferred # t	o Call:	
Email:				
		<u>Housing</u>		
	s about your housir ether you own or re	ng situation. Indicate with ent.	an X what type	of home you
House	Townhouse	Apartment	Mobile Home	Farm
Own	Rent			
Landlord's Na	ame and Phone Nu	umber:		
Do you have	your landlord's pe	rmission to foster a pet?	YES	NO
	A 2-week quarant	r other area where you ca ine (for cats) is highly rec		
For dogs, do you have a fenced in yard? YES NO				NO
If so, what size	ze and what type o	f material?		
Provide the number of people living in your home. Adults Children			Children	
Ages of Child	dren			
Does anyone have asthma/allergies to animals?			YES	NO



How many hours a day will you be away from home?		
Does everyone in your home agree with fostering an animal?	YES	NO
If not, please explain.		

Pets

Please tell us about your current pets, i.e. the ones living with you in the home where you intend to foster.

Type (Cat, Dog, Etc.)	Breed	Gender/ Altered?	Age	How long have you had it?	Other Info



Please tell us about your previous pets (last 10 years).

Type (Cat, Dog, Etc.)	Breed	Gender	How long did you have it?	What happened to it?

Please provide the name and phone number of your veterinarian. It is very important that resident pets be current on vaccinations.
References
Please provide the names, addresses and phone numbers of three references, two of whom are not family members.
Reference #1:
Reference #2:
Reference #3:



Preferences

Why do you want to provide foster care?				
What animals are yo	ou willing to foster? (In	dicate all that a	apply.)	
Cats	Dogs	Kittens	Puppies	
Pregnant Cats	Pregnant Dogs			
Cats w/ Kittens	Dogs w/ Puppies	Bottle Babie	S	
Senior Cats	Senior Dogs			
Injured/Recovering Cats Injured/Recovering Dogs				
Are there any limitat	ions to your ability to μ	provide foster c	care? If so, please describe.	



Please read carefully and indicate your acceptance by initialing each paragraph.

I agree to provide my foster animal(s) with appropriate food, water, shelter, and care. I agree to provide a high-quality diet (high protein, low carbohydrates, grain-free) as recommended by the foster care coordinator. I understand that as a foster care provider, I am responsible for food, shelter, and litter expenses. I agree to ask for financial support, if required, from the AWLFC Foster Care Coordinator. AWLFC will provide formula for bottle babies.
I understand that I am responsible for ensuring that my foster animals receive prompt and regular veterinary care. That said, I understand that AWLFC is responsible for funding medical care for foster animals. I agree to get approval from the foster care coordinator before taking the animal to the veterinarian. Exceptions to this will be made ONLY in the case of extreme emergency. I also agree to be present with my animal at the scheduled appointment time or reimburse ALWFC for the cost of missed appointments.
I agree to regularly trim my foster animal's nails so as to help them become familian and comfortable with regular nail trimming. I also agree to provide suitable scratching posts and materials to promote scratching on desired surfaces (not furniture) for cats.
I agree to actively participate in promoting my foster animal(s) by bringing him/her to adoption events and by making him/her available for photographs and providing biographical information for petfinder.com. I agree to ensure that animals brought to adoption events are clean (no fleas, no ear mites or waxy ears, trimmed claws, no runny eyes, etc.) and healthy.
During adoption events, I agree to stay with my animals and help promote them to suitable adopters. If I cannot stay with them, I agree to make alternative arrangements in advance. I also agree to bring their medical forms and documentation to adoption events.
I agree to make follow up calls/inquiries to the families who adopt my foster animals; the first call will be made within one (1) week of the adoption, with a second follow up call in approximately one (1) month.
I understand that AWLFC does not have a shelter and cannot provide care for foster animals while foster caretakers are on vacation or business trips.
Knowing that the AWLFC doesn't have a shelter I will make a commitment to keep and provide care for my foster animals until they are adopted.
I understand that AWLFC will make an effort to assist the foster care provider with their foster animals in an emergency situation.



designated representative of AWLFC before they are accepted into the foster care program.
I understand that all foster animals will be adopted following AWLFC adoption policies, including an interview, adoption application and contract.
I understand that AWLFC often has no prior knowledge of the foster animal's temperament or pre-existing medical conditions and therefore will not be liable for property damage or harm to persons or animals caused by this animal while in the foster home's care.
Signature:
Printed Name:
Date: