



ALMOST HOME ANIMAL RESCUE

P.O. BOX 5302

Maryville, TN 37802

865-977-0751

info@almosthometn.net

FOSTER MEMBER APPLICATION

Name _____

Address _____ City/State _____ Zip _____

Home Phone _____ Work Phone _____ E-Mail _____

VETERINARIAN REFERENCE

Name _____

Address _____ City/State _____

Phone Number _____ Fax Number _____

How long have you gone to this office? _____

Under what name are the records listed? _____

PERSONAL REFERENCE (non-family member)

Name _____ Relationship to you _____

Address _____ City/State _____

Home Phone _____ Work Phone _____ E-Mail _____

PERSONAL REFERENCE (non-family member)

Name _____ Relationship to you _____

Address _____ City/State _____

Home Phone _____ Work Phone _____ E-Mail _____

LIVING SITUATION

Where do you live? House Farm Townhouse/Duplex Apartment Mobile Home

Do you own or rent? Own Rent

If you rent, has your landlord given you permission to foster animals? Yes No

Landlord's name _____ Landlord's telephone number _____

What will happen to the animals if you move? _____

How long have you lived at this address? _____

Do you have a fenced yard? Yes No

If yes, what type of fence? _____ How high? _____

If you have roommates, do they agree to have animals in the home? Yes No

How many people live at this address? Adults _____ Children _____ Ages of Children _____

PETS

Please list all the pets you have owned in the last five years: _____

Are all these animals still with you? Yes No

If no, please explain the circumstances _____

Are/were all your pets spayed or neutered? Yes No

Are/were all your pets up-to-date on shots and healthy? Yes No

If no, please explain. _____

Do any of your current pets have health and/or temperament issues? Yes No

If yes, please explain. _____

SAFETY & SHELTER

Where will the animal(s) be kept? Indoors Outdoors Both

Where will the animal(s) sleep? _____

How long will the animal(s) be left alone during the day? _____

If fostering a cat, will you keep the cat indoors? Yes No

If fostering a feral cat, where will you keep it? _____

If fostering a dog, how much time per day will you allow for exercise? _____

How long will the animal be crated, if at all, during the day? _____ Night? _____

Do you agree to the responsibility of keeping up with the necessary veterinarian care needed for the fostered animal(s)? Yes No

Who will care for the animal while you're away? _____

If a home is found for the fostered animal, will you follow the adoption procedures of Almost Home?
 Yes No

BEHAVIOR ISSUES

Do you know how to house-train an animal? Yes No

If fostering a dog, would you consider obedience training if it is necessary? Yes No

If fostering a cat, are you considering de-clawing? Yes No

If a behavioral problem should arise (i.e. chewing, barking, scratching), how would you address it? _____

If a behavioral problem seems irresolvable, do you agree to contact Almost Home to learn how to address the problem? Yes No

WHAT YOU WOULD LIKE TO FOSTER?

What kind of animal are you interested in fostering? _____

If applicable, what size animal would you like to foster?

Extra Small Small Medium Large Extra Large

Are you interested in fostering an animal of a particular age? If so, what age? _____

How many animals would you like to foster? _____

How often would you like to foster? _____

Signature

Date

FOR AHAR USE ONLY

Initial AHAR representative _____

Follow-up AHAR representative _____