



# Centerville Pet Rescue

Suite 7, 237 Centerville Road Lancaster, PA 17603  
www.cvillepetrescue.org info@cvillepetrescue.org

# Foster Application/Agreement

***Fostering is a wonderful and rewarding experience but can also be time consuming and hard work. Please seriously consider all aspects of the foster care program before submitting an application. All first-time foster care providers must complete the following application and allow an in home visit by one of our representatives.***

## ***Personal Information***

**PLEASE PRINT CLEARLY**

Last Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ First Name \_\_\_\_\_

Co-Applicant \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Numbers \_\_\_\_\_  
Home Work Cell

Name of Employer \_\_\_\_\_  Part-time  Full-time

E-Mail Address \_\_\_\_\_ Date of Birth \_\_\_\_\_

## ***Household Questions***

I/we Live in a:  House  Apartment  Condo  Mobile Home

I/we:  Own  Live with Parents  Rent If you Rent are pets allowed?  Yes  No

If you rent provide landlord's name and phone # \_\_\_\_\_

If you rent must you provide a security deposit or pay additional rent?  Yes  No

How long have you lived at current address \_\_\_\_\_

If less than 2 years provide previous address \_\_\_\_\_  
Street

# of Adults in Home \_\_\_\_\_  
City State Zip

# of Children in Home \_\_\_\_\_ Ages \_\_\_\_\_

Name(s) of other adult(s) in the household \_\_\_\_\_

Are you planning on moving in the next 2-3 months?  Yes  No

Is anyone in your home allergic to animals?  Yes  No if YES select  Dogs  Cats

**Pet History** If you require more space, use back of application.

Do you own other pets?  Yes  No **If "YES" please answer the following:**

How many pets do you own? \_\_\_\_\_ Are they current on their vaccinations?  Yes  No

If you have cats do they go outside?  Yes  No

**Pet 1**

Name \_\_\_\_\_ Type/Breed \_\_\_\_\_ Sex  Male  Female

Age \_\_\_\_\_ Neutered/Spayed  Yes  No Length of Time Owned \_\_\_\_\_

**Pet 2**

Name \_\_\_\_\_ Type/Breed \_\_\_\_\_ Sex  Male  Female

Age \_\_\_\_\_ Neutered/Spayed  Yes  No Length of Time Owned \_\_\_\_\_

**Pet 3**

Name \_\_\_\_\_ Type/Breed \_\_\_\_\_ Sex  Male  Female

Age \_\_\_\_\_ Neutered/Spayed  Yes  No Length of Time Owned \_\_\_\_\_

**Pet 4**

Name \_\_\_\_\_ Type/Breed \_\_\_\_\_ Sex  Male  Female

Age \_\_\_\_\_ Neutered/Spayed  Yes  No Length of Time Owned \_\_\_\_\_

Have you had other pets in the past 5 years?  Yes  No

If YES, what happened to them? \_\_\_\_\_

Have you ever given up a pet for adoption?  Yes  No

If YES, please explain why \_\_\_\_\_

**Commitment Questions**

Have you fostered before?  Yes  No if YES, for which organization? \_\_\_\_\_

If yes, what animals did you foster and what was the outcome? \_\_\_\_\_

How did you hear about our foster program? \_\_\_\_\_

What type of pets are you interested in fostering? **(Please check all that apply)**

<b>Mama Cat &amp; Kittens</b> <input type="checkbox"/> No <input type="checkbox"/> Maybe <input type="checkbox"/> Definitely
<b>Kittens (Bottle Fed)</b> <input type="checkbox"/> No <input type="checkbox"/> Maybe <input type="checkbox"/> Definitely
<b>Kittens (Past Bottle Feeding)</b> <input type="checkbox"/> No <input type="checkbox"/> Maybe <input type="checkbox"/> Definitely
<b>Adult(s)</b> <input type="checkbox"/> No <input type="checkbox"/> Maybe <input type="checkbox"/> Definitely
<b>Injured Pet</b> <input type="checkbox"/> No <input type="checkbox"/> Maybe <input type="checkbox"/> Definitely
<b>Sick Pet (URI, Skin Issues, etc)</b> <input type="checkbox"/> No <input type="checkbox"/> Maybe <input type="checkbox"/> Definitely
<b>Under Socialized Cat(s)/Kittens (Lots of TLC needed)</b> <input type="checkbox"/> No <input type="checkbox"/> Maybe <input type="checkbox"/> Definitely
<b>Temporary Boarding for Displaced Owners (Short &amp; Long Term)</b> <input type="checkbox"/> No <input type="checkbox"/> Maybe <input type="checkbox"/> Definitely

What length of time can you commit to fostering (weeks, months, etc): \_\_\_\_\_

How much time will you devote to your foster pet's care and socialization each day: \_\_\_\_\_

Are you able to visit us at least every 2 weeks for care & paperwork?  Yes  No

Name of your Veterinarian: \_\_\_\_\_

Phone number of your Veterinarian: \_\_\_\_\_

Have any of your pets ever had babies?  Yes  No

Where will the foster pet be when you are home? \_\_\_\_\_

Where will the foster pet be when you are **not** home? \_\_\_\_\_

Do you have a safe place to keep your foster pet separate from your pets for the short term and long term if needed?  Yes  No If YES, where? \_\_\_\_\_

Are you comfortable administering oral and/or topical medications?  Yes  No

How long are you willing to allow your foster pet to adjust to your home/schedule? \_\_\_\_\_

What will you do if your foster cat scratches or sprays in unwanted areas? \_\_\_\_\_

What will you do if your foster pet has accidents in your home? \_\_\_\_\_

Are you willing to meet with potential adopters and visit us to finalize adoptions?  Yes  No

Under what circumstances would you not be able to complete the foster program and return the animal before an adopter is found? \_\_\_\_\_

### **Important-Please Carefully Read and Initial the Following Terms for Fostering**

\_\_\_\_\_ I agree to comply with all local and state laws and ordinances relating to the care of domestic animals, and will not engage in any illegal activity with my foster animal.

\_\_\_\_\_ I understand that no foster cat(s) is allowed outside.

\_\_\_\_\_ I understand that the pet I am taking into foster care may not be housebroken and I am willing to train the pet and give it time to adjust to training.

\_\_\_\_\_ I understand that no foster pet(s) is allowed to be left unattended with children.

\_\_\_\_\_ I understand that there are no guarantees of the behavior, health or disposition of my foster.

\_\_\_\_\_ I understand that the pet(s) I am taking into foster care may not be used to living indoors and may scratch or soil my furniture or belongings. If my foster pet(s) is destructive I will confine it to a safe area where it cannot do damage and will work to positively modify its behavior.

\_\_\_\_\_ I will use only positive reinforcement for training and will not use any kind of physical punishment regardless of behavior issues.

\_\_\_\_\_ I understand that CPR may not know the circumstances the pet(s) may have come from and it may take time for the pet(s) to adjust to new situations, people & other animals in my home.

\_\_\_\_\_ I understand that a foster pet(s) cannot be given away to a new home without the adopter coming to CPR to be approved and finalize all adoption paperwork.

\_\_\_\_\_ I understand that a foster pet(s) cannot be adopted until they are spayed/neutered.

\_\_\_\_\_ If I decide that I cannot follow through on my foster care commitment, I will give 48 hours notice. If at any time I feel that my safety or the safety of my family or pets is at risk, I can return my foster pet(s) immediately.

**RELEASE**

I/we agree to release, discharge, indemnify and hold Centerville Pet Rescue (CPR), and/or their member/partner organizations harmless from and all damage as a result of and in the providing of any and all services and or products, including but not limited to the adoption of an animal. I recognize that animals at Centerville Pet Rescue (CPR) and/or its member/partner organizations come with the risk of injury or sickness, including personal injury or harm to my family, other individuals and animals. On behalf of myself, my heirs, personal representatives and executors, I hereby release, discharge, indemnify, and hold harmless Centerville Pet Rescue (CPR), its agent, servants, employees, board members, partners, member organizations and sponsors from any and all claims, causes of action or demands, of any nature or cause connected with their services and/or products provided.

---

Name of Applicant (must be 18 years of age or older)

Date

---

**Signature of Applicant**

---

Name of Co-Applicant

Date

---

**Signature of Co-Applicant**