



# Hearts 4 Paws, Inc.

## Volunteer Foster Application

Applicant: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Main Contact Phone: \_\_\_\_\_ Secondary Contact Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

What type and number of animals are you interested in fostering? Number \_\_\_\_\_

Senior  Adult  Kitten  Bottle Baby  Feral  Shy  Pregnant  FIV+  Other: \_\_\_\_\_

Why do you want to foster? \_\_\_\_\_

How many adults currently reside in your home? \_\_\_\_\_

How many children currently reside in your home? \_\_\_\_\_ Ages: \_\_\_\_\_

Does any member of your family have any allergies to animals?  yes  no

If yes, please explain: \_\_\_\_\_

Who will be responsible for the foster's care? \_\_\_\_\_

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

If no one is home, where will the foster be kept? \_\_\_\_\_

Do you own or rent your residence?  Own  Rent

If you rent, please provide your landlord's name and contact number or attach a letter from your landlord or copy of lease stating that you are allowed to have animals.

Landlord Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you ever had a pet before?  yes  no

Have you ever adopted an animal from a rescue/animal control agency before?  yes  no

Have you ever fostered an animal before?  yes  no

Have you applied to other shelters to foster recently? If so, please list: \_\_\_\_\_

Describe any pets you have had in the last 5 years, including small animals, reptiles, birds, etc:

Name	Animal Type	Age in Years	Years in Your Care	Spayed/ Neutered?	Is pet current? If not, please list the reason pet is no longer with you

Current or most recent veterinarian: \_\_\_\_\_ Vet Phone: \_\_\_\_\_

*Please call your veterinarian in advance and grant them permission to speak with a Hearts4Paws representative about your pets' history!*

Please provide 1 personal reference (not a family member):

Name	Phone number

*Please let your personal reference know that a Hearts4Paws representative will be contacting them!*

What precautions will you take to introduce your foster into your home, if you have other animals?

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If a behavioral problem arises, what steps would you take to work on it?

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Are you willing to sign a volunteer foster agreement?     yes     no

*H4P must approve medical treatment for all fosters, including in emergencies, or the foster may be responsible for vet charges.*

Are you able and willing to provide room and board (space, food, litter) for a foster?     yes     no

*H4P requires the use of Purina Cat and Kitten Chow, which can be provided upon request.*

Are you able and willing to transport a foster to veterinary appointments?     yes     no

*Most appointments will be in New Bedford, MA and/or Marion, MA.*

Are you able and willing to keep a foster until it is ready for an open Adoption Center spot?     yes     no

*Fosters may need behavioral or medical work before they are deemed adoptable, and there must also be an open spot for the foster in the Adoption Center. H4P does not have a central facility to house animals.*

Do you agree to permit a visit to your home by appointment?     yes     no

By signing this form, I/we acknowledge that all information on this form is true and correct. I/we understand that any misrepresentation of fact may result in Hearts4Paws refusing adoption privileges to me/us. If my/our request for adoption is approved and later Hearts4Paws discovers the above information is not true or correct, Hearts4Paws reserves the right to remove the foster from my home.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_