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Foster Care Application

Thank you for taking the time to fill out this application. Your information will remain confidential and used only as part of the LCHS Foster Care Program.

PERSONAL ?	Information	N (Please print):				
Name:				Age:	Date: _	
Address:						
City:				Stat	te: Zip: _	
Home phon	e:		Work	x/Cell phone: _		
Email:						
How did yo	u hear about u	ıs?				
How many Adults over	the age of 21 (your household (including self):_	Ages:			Ages:
J		O	1	<i>,</i> ,	1	
•		APARTMEN		DUPLEX	MOBILE HO	
If ren able t	ting, we will co	e receive positive c	rd to ask if fosterin		ur home is accept	table. You will not be
Dog/Cat	Breed	Name	Age	M/F	Altered?	How long owned?
Please use ha	ck of amilication	if you run out of	snace We recomn	lend all other an	imals in your ho	he be up to date on
	, , ,	j concerns, please i	•		U	•
Who is you	r current Vete	erinarian?]	Phone:	
Who will be	e the primary	caretaker of you	ır foster pet(s)? _			
What type o	of pet(s) are ye	ou interested in	fostering?			
Dog	Puppy	Cat	Kitten			
If you are in	nterested in ca	nts/kittens only,	you may skip to	the final sect	ion.	

				Jnfenced yard			_	tely fenced yard	
0	fence:			ade of?	Wood	Chain link	Brick	Other	
LC	CHS foster do	gs and pi	ippies mus	st be supervised	at all times	when outdoors.			
If no fenc	ed in yard, o	do you a	gree to ke	ep your foster	dog on lea	ısh at all times oı	atside?	Yes No	
How wou	ıld you desc	cribe yo	ur level o	f experience v	with dogs?	check all that app	ly		
Never ha	-	•		-	_	ldhood pet dog			
	or more as	an adult				perience with p	owerful bre	eds	
Have ex	perience wo	rking w	ith on-goi	ing medical pr		th a personal dog			
						ing service etc.,	,		
				ioral problem		0			
				ary hospital	1	O			
	ofessional d			<i>J</i> 1					
		0		nce, if yes, plea	se describ	e:			
Do you h List expe	ave experie rience with	nce witl specific	n: small breeds: _	dogs medit	ım dogs	large dogs			
What typ	es of dog ar	e you in	terested i	in fostering? (Check all tha	t apply			
Adult o	dog				Puppies	3			
Mother	with nursir	ng puppi	ies			ned puppies/Bot	tle babies		
	g/puppy				Injured	dog/puppy			
Dog/puppy with behavioral issues Pit Bull/Bully breeds					rm hospice care				
How man	ny hours du	ring the	AVERA	GE day will th	is dog spe	nd WITHOUT a	human?		
Where w	ill this dog b	e when	someone	is home?					
Where will this dog be when alone?					Where will this dog sleep at night?				
What situ	ations do y	ou feel ı	inprepare	ed for?					
Excessiv	e barking			Destructive	Destructive chewing Not housetrained			ned	
Digging	5			Escaping			source (food	d/toy) aggression	
Shy, fearful, or undersocialized dog Not good with small animals/cats Providing on-going training			Not good with children Scratching/biting Not good with other Administering medic			other dogs			
						medications			
			Very high a	Very high activity level Deaf/Blind dogs			ogs		
•	ave a prefer								
			lease list size preference:						
Breed?	YES	NO		If yes, please list breed you prefer:					
Age?	YES	NO	If yes, p	olease list age _l	preference:				
Please tel	ll us anythin	ıg else yo	ou would	like us to kno	w to help n	natch you up wit	th the right	foster animal:	
Staff Not	es:								

Please provide three reference	es we can contact:	
1. Name:	Phone:	
2. Name:	Phone:	
3. Name:	Phone:	
approved list of providers. LCHS you of any medical treatments to be	foster care volunteers may always refore administered, the anticipated length	re eligible for foster care, and appoints foster caregivers from a pre- refuse any specific request for any reason. LCHS staff will inform agth of the foster-care period, the objectives of each particular n, etc.), and any other restrictions or expectations we may have.
LCHS does not accept into this pro	ogram those convicted of violent crim	rimes or crimes involving animal cruelty or neglect.
I certify that all the information coacceptance into Lewis County Hu		and correct. Completion of this application does not guarantee
Signature	Date	ate
Return Application to:		
Lewis County Humane Soc	riety	
P.O. Box 682		
Lowville, NY 13367		
Email: lewiscountyhumanesociety	y@gmail.com	

The Lewis County Humane Society Foster Care Contract

The parties hereto agree as follows: The foster caretaker signing below acknowledges receipt from the Lewis County Humane Society (hereby referred as LCHS) of the animal described below for foster care. In accepting this animal, and in all consideration for being entrusted with the care, custody, responsibility and possession of the animal, agrees to be bound by the covenants and the conditions stated below:

Street Address:				
City:	State:		,	Zip:
Home Phone Number:				
Cell Phone Number:		Text:	Yes or	No
Email address:				
Emergency Contact Name:		Relationship:		
Phone number:				
Animal(s) Received:				
Name(s):				
Breed:				
Sex:	Age:			
Medical Conditions (if any):	_			

Foster Name:

Please read the following statements carefully and initial next to them to indicate that you fully understand and agree to abide by them when fostering for LCHS.

You will be expected to keep the animal safe and secure, return it to LCHS when requested to do so, and not promise the animal to anyone, or imply that you have the authority to approve a potential adoption. LCHS retains ownership of all animals placed in foster care, and will make all decisions regarding the adoption & placement of the animals fostered.

The foster caretaker understands and acknowledges that he/she is responsible for all expenses incurred as a result of fostering the animal. The sole exception is that LCHS will provide, at no charge, vaccinations, spaying/neutering, and medications of aliments. Unless otherwise arranged, the foster parent is responsible for providing all food, litter, bedding, and toys for the animal while it is in their care at home. The foster parent is responsible for transporting the animals (at their own expense) to and from LCHS or Countryside Veterinarian Clinic for veterinary appointments, surgery, behavior evaluations, vaccinations, etc. The foster parent may also be responsible for transporting the animal to and from adoption events, and to off-site training classes, at LCHS's discretion.

Your foster pet may be messy. They may not be house-trained or litter-trained. You understand that there may be accidents in your home.

Many dogs will chew furniture, and many cats will also scratch furniture. You are at full understanding that your foster may cause damage to your property and that you are fully responsible for any damages done. You also agree to work with the foster to diminish these undesirable behaviors.

You agree to keep your foster dog on a leash or in a fenced area when they are outside. You will not leave them outside unattended unless fully fenced in. They will predominantly be kept indoors.

You agree to keep your foster cat indoors at all times. Cat/kitten fosters are not permitted to go outside.

You will not bring the animal to the veterinarian unless directed to do so by LCHS. One exception may be if there is an unforeseen circumstance of an emergency nature and you are unable to contact a LCHS employee or board member. During this time you will only take the animal to be seen by Countryside Veterinary Clinic. If the animal is taken to another veterinary clinic without LCHS permission, the caregiver will not be reimbursed for the expenses.

Representatives of LCHS may need to contact you to discuss the foster pet. You agree that you will be entirely honest and forthright in regard to your foster pet's condition, positive or negative.

Members of LCHS will be allowed to inspect the premises in which the animal will be maintained or are maintained, from time to time for the purpose of determining the suitability of those premises for the care and maintenance of the animal. If applicable, before fostering, LCHS will bring the pet to be fostered to your home to do a meet and greet with your pets and/or members of your household.

There are some risks to your own pets, especially if foster animals are not kept separate. You understand that LCHS is not responsible for any medical expenses incurred by your own pets due to fostering.

If the foster pet is to cause injury to you or household members, or others on your property, LCHS is not responsible for any injuries or expenses that may be incurred due to fostering. You will not leave the foster animal in the care of another person, including adopters, without prior approval. The caregiver should check with their insurance agency to verify if they will be covered in the event of injury or damage caused by a foster animal.

You must notify LCHS immediately of any incidents (relating to the foster) causing injury to people or animals.

In the unfortunate event the animal becomes ill during foster care as to warrant euthanasia, the foster caretaker will notify LCHS immediately and **before** the euthanasia occurs. Any applicable medical records records leading up to the illness causing the animal to be euthanized will be provided to LCHS.

There are many reasons for fostering to include allowing the foster to have a comfortable home setting, restoring to health, rearing to adoptable age, socialization, etc. If you feel you can no longer provide the agreed upon foster service, you agree to return the dog to the LCHS immediately. On the other hand, if you wish to become a "foster failure" and would like to adopt the foster pet, you may apply to do so. You will have priority over other potential adopters. There is no discounted price to foster parents.

I understand that although LCHS takes reasonable care to screen animals for foster care placement, it makes no guarantees relating to the animals' health, behavior or actions. I understand that I receive foster care animals at my own risk and can decline to accept any animal for which LCHS has asked me to provide care. I acknowledge that LCHS is not responsible for any property damage or personal injury suffered by me, members of my household, including my own animals, or any third parties during a foster placement, and I assume liability to provide adequate controls to prevent such damage or injury.

Signature	Date	
Witnessed by	Date	