

THE FELINE RESCUE ASSOCIATION



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Foster Parent Application and Agreement

Your name: _____

Address: _____

City, State Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

Emergency Contact: _____ Relationship: _____

Emergency Contact Number(s): _____

Are there children in your house under the age of 10? Yes No

Under the age of 3? Yes No

What sort of fostering do you want to do?

- Adult cat (shy) Adult cat (friendly) Litter of kittens (friendly)
- Litter of kittens (shy) Single friendly kitten Single shy kitten
- Bottle babies Nursing mother and babies Whoever needs it

Have you ever fostered before? Yes No

If you fostered for another group, which? _____

Why don't you foster for them anymore? _____

Do you have pets currently? If so, describe: _____

Are your current companion animals spayed/neutered? Yes No

Are your companion animals current on their vaccinations? Yes No

Have your cats been tested for Feline Leukemia Virus? Yes No

What is your work schedule like? _____

Are you a pretty easy person to get ahold of? Yes No

What would you do if a foster cat/kitten became ill? _____

What would you do if a foster cat/kitten passed away? _____

What would you do if your foster cat ran away? _____

How long can you/are you will to foster for? _____

Where will you keep your foster cat(s)/kitten(s)? _____

Are you able to transport your foster cat(s) to the vet or clinic if necessary? _____

Are you OK with potential adopters visiting the cat(s) at your home? Yes No

Do you have knowledge of or experience with any of the following?

- Socializing feral kittens Socializing shy adult cats Force-feeding sick cats
- Tube-feeding kittens Feeding and eliminating infant kittens

I anticipate needing the following: Crate Litter box(es) Bowls Food
 Litter Bedding Toys

Have you or anyone in your household ever been convicted of animal abuse or neglect, or do you have any such charges currently pending against you?

Yes No

By signing this form, I/we acknowledge that all information on this form is true and correct. The *Feline Rescue Association* reserves the right to remove the foster cat animals from my home. *Feline Rescue Association* has permission to visit the cat(s) at my house periodically.

Signature: _____ Date _____

Thank you for agreeing to become a foster parent! Each foster home enables us to save another animal. We appreciate the love, time and commitment you make to the animals you foster.

As a foster parent for the Feline Rescue Association,

- I agree to provide a loving, temporary home and a balanced diet.
- I agree to provide food, water, shelter, and the best humane treatment of the foster animal(s) I am given to the best of my ability.
- I agree to administer medication, as needed, for any animal(s) in my care.
- I agree to keep the animal(s) at the property listed above.
- I agree to comply with all local and state laws and ordinances relating to the care of domestic animals.
- If I decide to adopt this animal, I will sign an adoption agreement and pay the adoption fee.
- If for any reason either party decides that the foster situation is not working, I agree to return the foster animal(s).
- I acknowledge that the animal(s) entrusted to me are the property of *The Feline Rescue Association*. When asked to return the animal(s) I agree to do so without conflict, and I understand that to refuse to do so may result in criminal prosecution against me.
- I agree to immediately return the animal(s) to The Feline Rescue Association if I become incapable of caring for the animal(s).
- **If any animal(s) entrusted to me should die while in my care, I will immediately notify *The Feline Rescue Association* and return the remains at once.**
- I agree to let *The Feline Rescue Association* into my home to perform an inspection to ensure that the animal(s) I am caring for are being kept humanely. If *The Feline Rescue Association* does not feel, for any reason, that this environment is proper for the animal(s), they may repossess the animal(s) at any time.
- Sometimes animals in foster care require medical attention. **If the animal(s) become sick, I agree to call the *The Feline Rescue Association* immediately, and I agree to return the animal(s) to the veterinarian specified by FRA for care. If I use an outside veterinary service to treat FRA animals, I understand I am financially responsible for all charges from that service unless otherwise agreed.**
- I agree to release, discharge, indemnify and hold *The Feline Rescue Association* harmless for any and all damage caused by an animal directly or indirectly, to my person, family, personal property or pets while performing any and all duties as Foster Parent.
- I acknowledge my awareness that individual cats respond to situations differently, that such responses may be unpredictable, and that *The Feline Rescue Association* makes no claims, representations, or warranty, either expressed or implied, as to the behavior or temperament of animals placed.
- **I agree to remain in reasonable contact with *the Feline Rescue Association* and to return all calls and emails within an appropriate time frame.**

I have read and agree to the above,

Your Signature

Date