



# Dog 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 Midland Humane Coalition Foster Care Program.

## PERSONAL INFORMATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home phone: \_\_\_\_\_ Work/Cell phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 How did you hear about us? \_\_\_\_\_

## HOUSEHOLD INFORMATION

**Please list all the household members that will be living with the foster animal.**

Name	Relationship	Age	Allergies? Y/N	Type of Allergy
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	

**Do you live in:** HOUSE APARTMENT CONDO DUPLEX MOBILE HOME TOWN HOME

**Do you:** OWN RENT LEASE How long have you been at this address? \_\_\_\_\_  
 If renting/leasing, are there pet restrictions?? YES NO If yes, what are they \_\_\_\_\_

Landlord's name \_\_\_\_\_ Landlord's phone \_\_\_\_\_

*If renting, we will contact your landlord to ask if fostering animals in your home is acceptable. You will not be able to foster until we receive positive confirmation.*

**Please list all of your current pets living in the household:**

Type/Species	Age	Sex	Spayed/Neutered?	Dog friendly?	Kept inside/outside?
			Y N	Y N	
			Y N	Y N	
			Y N	Y N	
			Y N	Y N	

*For everyone's safety, we recommend all other animals in your home be up to date on vaccinations. If you have any concerns, please discuss the idea of fostering animals with your veterinarian.*

## Describe your yard:

No yard Unfenced yard Partially fenced yard Completely fenced yard

Height of fence: \_\_\_\_\_ Made of? Wood Chain link Brick Other \_\_\_\_\_

If you don't have a fenced in yard, do you agree to keep your foster dog on leash at all times outside? Yes No

**PET CARE EXPERIENCE**

**Who will be the primary caretaker of your foster dog(s)?** \_\_\_\_\_

**How would you describe your level of experience with dogs?** *Check all that apply*

- Never had a dog
- Had one or more as an adult
- Have experience with on-going medical problems with a personal dog
- Have experience working at a boarding kennel/resort/pet sitting service etc.
- Have experience working with behavioral problems with a personal dog
- Have experience working in a veterinary hospital
- Am a professional dog trainer
- Have previous foster/rescue experience. Please describe: \_\_\_\_\_
- Had childhood pet dog
- Have experience with powerful breeds

**Do you have experience with:**      small dogs      medium dogs      large dogs

**List experience with specific breeds:** \_\_\_\_\_

**What types of dog are you interested in fostering?** *Check all that apply*

- Adult dog
- Mother with nursing puppies
- Sick dog/puppy
- Dog/puppy with behavioral issues
- Pit Bull/Bully breeds
- Puppies
- Unweaned puppies/Bottle babies
- Injured dogs
- Long-term hospice care

**How many hours during the AVERAGE day will this dog spend WITHOUT a human?** \_\_\_\_\_

Where will this dog be when someone is home? \_\_\_\_\_

Where will this dog be when alone? \_\_\_\_\_ Where will this dog sleep at night? \_\_\_\_\_

**What situations do you feel unprepared for? (Check all that apply)**

- Excessive barking
- Digging
- Shy, fearful, or undersocialized dog
- Not good with small animals/cats/dogs
- Providing on-going training
- Destructive chewing
- Deaf/blind/special needs dogs
- Not good with children
- Scratching/biting
- Very high activity level
- Resource (food/toy)aggression
- Escaping
- Not Housetrained
- Administering Medications

**Do you have preferences on the following:**

- Size?      Yes      No      If yes, please list size preference: \_\_\_\_\_
- Breed?      Yes      No      If yes, please list breed you prefer: \_\_\_\_\_
- Age?      Yes      No      If yes, please list age preference: \_\_\_\_\_

Please tell us anything else you would like us to know to help match you up with the right foster animal:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Staff Notes: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## **FOSTER CARE AGREEMENT**

Midland Humane Coalition (MHC determines the criteria for fostering, decides which animals are eligible for foster care, and appoints foster caregivers from a pre-approved list of trained providers. MHC will require you to fill out a foster application, a Pet Foster Care Agreement, as well as attend a Dog Foster Orientation Class prior to being accepted as a foster parent. MHC foster care volunteers may always refuse any specific request for any reason. MHC staff will inform you of any medical treatments to be administered, the anticipated length of the foster-care period, the objectives of each particular placement (restoring to health, rearing to adoptable age, socialization, etc., and any other restrictions or expectations we may have.

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

MHC cannot accommodate people fulfilling court-ordered community service within the Foster Care Program. MHC does not accept into this program those convicted of violent crimes or crimes involving animal cruelty or neglect. Students seeking credit for school service requirements should speak with the Foster Care Coordinator to discuss the program before proceeding.

MHC will provide (unless otherwise arranged) all food, collars, tags, leash, bedding, and toys for the animal while it is in MHC Foster Care. The foster parent is responsible for transporting the animals to and from MHC 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 the Foster Care Program Coordinator's discretion. Upon returning your foster animal to MHC you will be required to fill out a brief questionnaire about your foster animal's behavior and personality.

I have read and understand the statements above. I certify that all the information contained in this application is true and correct. I understand that although MHC 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 MHC has asked me to provide care. I acknowledge that MHC 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.

\_\_\_\_\_  
Name of Foster

\_\_\_\_\_  
Date

\_\_\_\_\_  
MHC Representative/Foster Coordinator

\_\_\_\_\_  
Date

## MHC Foster Expectations

(Please read carefully, **initial** each box, and sign to indicate agreement)

\_\_\_\_ Only designated MHC staff shall approve and place rescued animals into foster homes. The Foster Coordinator must be notified as soon as possible of any changes in the status of either the animal in your care or the foster home environment you have indicated above.

\_\_\_\_ All animals placed in foster care will be examined, will have been given/will be given all necessary immunizations and will have been/will be scheduled to be spayed or neutered.

\_\_\_\_ All basic medical expenses will be covered by MHC. Authorized MHC staff must approve any unusual expenses. Basics include: Spay/neuter, age-appropriate vaccinations, heartworm test, microchip, and prescribed medications. Fosters are required to get MHC staff approval to transport the animal to the emergency clinic prior to transportation.

\_\_\_\_ All basic supply expenses will be provided by MHC. Basic supplies include: dog collar, tag and leash, food, and some toys. Because each home is set up differently, exercise pens, confinement systems are available to fosters if supplies are available. All supplies must be returned when the foster animal is returned for adoption.

\_\_\_\_ Foster animals are to be kept clean and sanitary for their health and wellbeing. Supplies with which they are housed and/or contained in, such as x-pens, crates, blankets and beds, should also be kept clean and sanitary for the same reason.

\_\_\_\_ Fosters are expected to give the MHC animal safe and adequate housing and care. An MHC foster dog must wear his/her ID Tag at all times (except underage puppies who do not go home with collars, and must be on a leash or in a secure pet carrier when outside of its foster home or its enclosed yard. Dogs should not be left alone, outside unsupervised. During transport, the rescued animal must ride inside the car. The foster coordinator must be notified immediately if the animal in your care is injured or missing.

\_\_\_\_ Fosters are expected to follow medical and/or behavioral plans set forth by MHC staff. Fosters are expected to report any medical or behavioral concerns with 24 hours following appropriate channels and using the emergency protocols. Fosters are expected to use MHC approved training only. Please feel free to ask for help if you encounter challenges.

\_\_\_\_ Fosters are expected to exhibit professional conduct, timeliness and communication. Fosters are expected to arrive for appointments on time, as scheduled.

\_\_\_\_ Fosters are expected to care for the foster animal for the time agreed upon with the Foster Coordinator. If an emergency arises, please contact the Foster Coordinator to schedule a return to MHC.

\_\_\_\_ Legal ownership of all MHC animals remains with MHC until such time as proper adoption is completed. Only authorized representatives of MHC will conduct adoption interviews and process adoptions, transfers or relinquishments. Fosters are expected to comply with the adoption process. If a foster home decides to adopt the animal, the regular adoption fee applies. If a foster finds a suitable adoptive home for their animal, they will contact the foster coordinator and the potential adopter will go through Adoption Process with an MHC Adoption Counselor.

\_\_\_\_ Fosters must agree to home visits by Foster Coordinator/MHC staff as needed.

Foster name (printed): \_\_\_\_\_

Foster Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **RELEASE OF LIABILITY**

I/We have read and fully understand the MHC Expectations. \_\_\_\_ (initial)

There have been no other representations or promises other than those included in this Foster Application. \_\_\_\_ (initial)

I/We understand that all rescue volunteer work done with MHC is at my/our own risk. \_\_\_\_ (initial)

I/We, \_\_\_\_\_ have read, understand, and agree to abide by the conditions of the MHC Foster Home Agreement & Guidelines. I/we understand that all work done with MHC pursuant to this Foster Agreement is at my/our own risk, and that I/we assume such risk freely and voluntarily. I/we hereby release MHC and its agents and employees of any and all liability, property damage, and medical costs while I/we am/are providing volunteer foster care for MHC.

I/We, hereby for myself (ourselves), heirs, administrators and assigns, fully, irrevocably and unconditionally release and agree to hold harmless MHC and its individual members from any and all known or unknown, anticipated or unanticipated, suspected or unsuspected causes of action, charges, suits, debts, demands, claims, liabilities, losses, costs, expenses (including, without limitation, attorneys' fees) or damages, including but not limited to any medical costs, damage to property, persons or other pets, of any and every kind, nature and description, at law or in equity, in connection with or arising from while I am caring for the agreed rescue companion animal.

**Foster Volunteer Name/Signature**

**Date**

\_\_\_\_\_

\_\_\_\_\_

### **TO WAYS TO SUBMIT:**

**1. Save & Email completed Application Form**

**to: [foster@midlandhumane.org](mailto:foster@midlandhumane.org)**

**2. Save, print and mail the completed form to:**

Midland Humane Coalition  
Attn: Dog Foster Care Program  
P.O. Box 53213, Midland, TX 79710