



## FOSTER PARENT APPLICATION

Thank you for your interest in fostering a pet for the Yakima Humane Society! Please understand that submitting this application does not mean automatic approval. All potential Foster Parents must attend a Foster Volunteer Information Session, go through a home visit and interview and complete a Foster Training before any animal will be placed. Answering the following questions honestly, will provide information that will help us place animals in appropriate foster homes.

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell/Alternate Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Best Time To Contact You: \_\_\_\_\_

Preferred way of contact:  Phone Call  Text  Email

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### Section 1:

Do you rent or own your home?  Rent  Own Landlord's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Do you live in:  House  Condo  Mobile Home  Apartment, Complex Name: \_\_\_\_\_

How many adults in the home? \_\_\_\_\_ Children? \_\_\_\_\_ Ages: \_\_\_\_\_

### Section 2:

Please list any current pets in your home:

Breed	Age	Gender		Spayed/Neutered	
		Male	Female	Yes	No
_____	_____				
_____	_____				
_____	_____				
_____	_____				
_____	_____				

### We do need to verify vaccinations for the safety of your pets.

Are your pets up-to-date on vaccinations?  Yes  No If yes, please provide copies with application.

Please provide the name and number of your veterinary clinic: \_\_\_\_\_

Do you give your pets a monthly parasite preventative or have they been dewormed in the last 3 months?  Yes  No

Have you had any pet-related diseases in your home?  Yes  No If so, please explain: \_\_\_\_\_

\_\_\_\_\_

### Section 3:

Please check all animals listed below that you would be willing to foster:

Dogs:

- Pregnant dogs  Nursing dogs w/puppies  Un-weaned puppies  Injured dogs/puppies  Ill dogs/puppies
- Underweight dogs/puppies  Dogs/puppies needing socialization  Adult dog  Puppies



Cats:

- Pregnant cats       Nursing cats w/kittens       Un-weaned kittens       Injured cats/kittens       Ill cats/kittens
- Underweight cats/kittens       Cats/kittens needing socialization       Adult cat       Kittens

Please list any previous experience with those areas of animal care that you checked. (E.g. administering medications, bottle feeding, animal trainings, former foster experience):

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**Section 4:**

How long are you willing to foster an animal? \_\_\_\_\_

Where will you keep your foster animal? \_\_\_\_\_

Where will you keep your foster animal if you have to leave town? \_\_\_\_\_

Length of time during the day your foster would be left alone: \_\_\_\_\_

If fostering a dog, do you have a fenced yard?  Yes  No If yes, how tall is your fence? \_\_\_\_\_

As a Foster Parent are you willing to:

Transport animals to shelter and/or vet as necessary?  Yes  No

Take pictures and fill out animal personality forms?  Yes  No

Allow adoptive families visit your home?  Yes  No If no, what time works best for a shelter meet & greet: \_\_\_\_\_

**Please list two personal references:**

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

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

I certify that this information is true and understand that false information may result in not being accepted into the YHS Foster Parent Program. I understand that this application remains the property of the Yakima Humane Society.

Signature: \_\_\_\_\_

Date Received: \_\_\_\_\_    Attended Information Session     Home Visit/Interview     Training     Approved     Denied