

FURR Foundation Foster Application

PLEASE FILL ADOPTION APPLICATION OUT IN FULL.
ONCE COMPLETED, PLEASE MAIL OR EMAIL TO US FOR REVIEW.

Mailing address: 56 Locksley Drive, Hampton, Virginia 23666

Email: furrfoundation@gmail.com

By signing this contract, I agree that all statements in this application are based on personal knowledge and are made for purposes of my application to foster one or more animals through FURR's foster care program.

I would like to foster FURR Foundation animals. I can foster up to _____ (amount) animals at a time.

Restrictions on the type of animal I can foster. (For example, "No male cats", "Only adult cats", etc.) _____

Where will my foster animals stay during the day when I am not home?

- I understand a FURR representative may visit my home for a home inspection before my foster application is approved.
- I understand that if I am approved for fostering, I will also need to carefully read the "Foster Care Agreement", which is a separate document from this "Foster Care Application". The Foster Care Agreement represents a legal contract between a foster caregiver & FURR Foundation.
- I understand that if I am approved to foster an animal, I must review and sign the "Foster Care Agreement" before I can take my foster animal home.
- I have read this application in its entirety, and I agree that all statements contained in this document are made by me, and are thoughtful.
- I make this statement under penalty of perjury under the laws of the state of Virginia.

Applicant Signature: _____ Date: _____

FURR Rep. Signature: _____ Date: _____

Personal Information:

Name: _____ Email: _____

Home Phone: _____ Cell Phone: _____

Address: _____

Preferred Method of Contact?

- ☐ Call
- ☐ Text
- ☐ Email

Driver's License Number: _____ State of Issue: _____

- ☐ I own my home and am permitted to bring an animal(s) into my dwelling.
- ☐ I rent my home and am permitted to bring an animal(s) into my dwelling.

Landlord's Name: _____

Phone Number: _____

Address: _____

Length of time at this address? _____

- ☐ I have a fenced in yard.
 - ☐ Height of fence: _____ What is it made of? _____
 - ☐ The fence has a gate with a working lock.

☐ I have children at home.

- ☐ How many children? _____
- ☐ What age? _____

Employer Information:

Business Name: _____ Phone Number: _____

Address: _____

Position: _____ Length of time there: _____

Veterinarian Information:

The name of veterinarian(s) I use for my companion animal(s) (if more than one, please list them in order in the last 5 years.

- ☐ Please check to allow permission to contact your veterinarian(s) for vaccine statuses and animal history.

Clinic Name: _____ Veterinarian: _____

Clinic Phone Number: _____ How many years used? _____

Records are under the name of: _____

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Records are under the name of: _____

Your Personal Animal Information:

I have _____ companion animals at my home currently.

☐ Dogs? _____

☐ Cats? _____

☐ Birds or Exotics? _____

Is your companion animal(s) Spayed/ Neutered? _____

If not:

☐ I have bred my animal(s) in the past.

☐ I am currently breeding my animal(s).

Is your companion animal updated on:

☐ K9 or Feline Rabies Vaccine

☐ K9 or Feline Distemper Vaccine

☐ K9 Lepto Vaccine

☐ Feline Leukemia Vaccine

☐ Heartworm Prevention

☐ Flea/ Tick Prevention

How much time do they spend outside? _____

Will your personal companion animal(s) be held separate from your potential foster animals? _____

If so, then where? _____