



Ashe County Humane Society Foster Application

You Must Be 18 Years of Age to Foster—
(Please print neatly)

Date _____

Applicant's Name _____

Address _____

E-mail _____ Home Phone _____

Cell Phone _____ Work Phone _____

Referred to ACHS by: _____ (How did you hear about our foster program?)

Application to foster (circle all that apply):

- | | | | |
|-----------|-----------------|-----------------|---------------------|
| Adult Cat | Small Adult Dog | Large Adult Dog | Dog w/special needs |
| Kittens | Puppies | Older Dog | Cat w/special needs |

Why would you like to foster? _____

How many pets do you currently have at home? _____ .

Do you have the time and reliable transportation to be a foster? Yes No

1. Are you able to regularly bring your foster animal for Saturday pet adoption days between 10:00 am and 3:00 p.m.? Yes No

2. Are you able to make vet appointments for your foster animal as needed? Yes No

3. Vet or Animal Hospital preferred: _____

4. List any times or dates when you would be **unavailable** to foster: _____

Housing. Please circle all that apply: **Own** **Rent**

- | | | |
|-----------------|-------------------|----------------------------|
| House | Duplex | Live with parents/guardian |
| Apartment | Mobile Home | Live in roommate's home |
| Condo/Townhouse | Lot (mobile home) | Other: _____ |

If you rent, are pets allowed? Yes No

What is your landlord's name? _____ **Phone Number** _____

How long have you resided at your present address? _____ years _____ months (over)



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Total number of people residing at your address? Adults ____ Children ____

Ages of children? ____

If your living arrangements change (moving, new baby, etc.), what will you do with your foster animal? _____

Where will the foster spend its time? Indoors Outdoors Both

Where will the foster animal stay while you are gone during the day?

In fenced yard	Confined to area in home	Outside/unconfined
Tied or fastened on a run	Crated	Garage
Loose in home	Pen/kennel	Barn/outside building

Where will the foster animal sleep at night?

Run free inside home	Crate/kennel	Outside/confined
In bed with owner	Garage	Outside/unconfined
Confined to one room	Barn/outside building	Other:

If you foster a dog, are you prepared to teach it to:

Walk on a leash	Be housebroken (Toilet trained)	
Avoid Barking	Stay within fenced areas	Avoid destructive chewing
Avoid digging holes	Avoid aggressive behavior with animals & humans	

Does anyone in your household have allergies to pets? Yes No Specify

➤ **List pets currently owned or owned within the last three years:**

Cat or Dog	Age	Sex	Spay/Neutered	Vaccinated	What happened to your pet?
_____		M/F	Yes/No	Yes/No	_____
_____		M/F	Yes/No	Yes/No	_____
_____		M/F	Yes/No	Yes/No	_____

Do you agree. . .

to provide humane care – proper food, water, and shelter? Yes No

to provide the pet with regular preventive care, and immediate medical treatment by a licensed veterinarian if ill or injured?

Yes No

Would you allow a home visit as a condition of becoming a foster? Yes No

Do you agree to assist in having your foster animal spayed or neutered at the earliest possible date using the voucher you are provided?

Yes No



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Signature _____

Date _____

Driver's License ID _____

ACHS Initials _____