

FURRY FRIENDS FOSTER PROFILE

Personal Information

Name _____

Address _____

Phone _____

Email _____

Foster Options (check all that apply)

- | | |
|---------------------------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Kittens Bottle Feeders | <input type="checkbox"/> Puppy Bottle Feeders |
| <input type="checkbox"/> Kittens eating on their own | <input type="checkbox"/> Puppy eating on their own |
| <input type="checkbox"/> Pregnant Cat | <input type="checkbox"/> Pregnant Dog |
| <input type="checkbox"/> Mom Cat with nursing babies | <input type="checkbox"/> Mom Dog with nursing babies |
| <input type="checkbox"/> Cat/Kittens needing socialization | <input type="checkbox"/> Dog/Puppy needing socialization |
| <input type="checkbox"/> Cat/Kitten recovering from illness/surgery | <input type="checkbox"/> Dog/Puppy recovering from illness/surgery |

Availability and Home Conditions

- Have you fostered before? If yes, for what organization or shelter?
- What animals do you currently have in your home?
- Are your current animals up to date on vaccinations? Altered?
- Are your current animals good with new animals?
- Do you have a room (guest, bathroom, laundry) where you can quarantine the foster, if needed?
- Do you have children in the home? If so, what ages?
- How long will the animal be alone each day?
- Length of time available for each foster?
- Anything else you think we should know about you? You can write on the back, if needed.

Signature _____ Date _____