



Foster Care Application

Thank you for your interest in fostering a dog/cat from the Humane Society of El Paso. So that we may find the best foster home for the dog/cat, we ask that you answer the following questions as completely and as honestly as possible.

**Please mail or return the completed application to: 4991 Fred Wilson, El Paso, TX 79906 or fax: 915-566-0723
Please mark to the attention of Melissa Lopez, Community Outreach Coordinator, for questions call: 915-532-6971x12**

NAME: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

E-MAIL ADDRESS: _____

HOME PHONE: _____ OTHER PHONE: _____

BEST TIME TO REACH YOU: _____ BIRTHDATE: _____

HOUSEHOLD

Please list the names, ages and relationship of all adults in the household:

Please list the names, ages and relationship of all children in the household:

If there are no children living with you, are there children that visit, for example: grandchildren, children you baby sit, etc.?

Does anyone in the household have allergies?

How often do you travel? Are you planning a vacation in the near future?

DWELLING INFORMATION

What type of housing do you live in? (Apt/Condo, Townhouse, Single Family....)

How long have you resided at this address?

Do you own/rent? Renters: Do you have written permission to foster an animal? What are the size and breed restrictions the landlord has in place, if any?

Do you have a fenced in yard? If so, briefly describe it: (height, material, gates, etc.).

If not, how will you exercise the dog/cat? _____

CURRENT AND PREVIOUS PETS

Have you ever owned a dog/cat before? If so, what particular breed(s) or breed mixes?

What pets do you currently own? How long have you owned them? Are you willing to bring in their current vaccinations? (Proof of current vaccinations will be needed prior to fostering a pet.)

If you currently own a dog/cat, is it spayed/neutered?

PLANNING FOR THE FOSTER

Have you ever fostered an animal before? If so, what was your experience? Why are you interested in fostering?

Where will the dog/cat be kept during the day? Where will it be during the night?

How many hours per day will the dog/cat be left alone?

Where will the dog/cat stay when it is left alone?

Who will be the primary caretaker of the dog/cat?

Have you ever crate-trained a dog or trained a cat to use a litter box?

Are you willing to have someone from the HSEP visit your home for a home visit?

Are you willing to cover the costs of caring for a foster dog/cat except for medical expenses?

Please check all you are interested in fostering:

Pregnant/Nursing Dogs
 Bottle Feeding Puppies
 Special Needs' Dogs
 Older Dogs
 Large Dogs
 Medium Dogs
 Small Dogs

Pregnant/Nursing Cats
 Bottle Feeding Kittens
 Special Needs' Cats
 Older Cats
 Other _____

Please state any other information that may be used for the proper placement of foster animals. Example: live on base—not allowed specific breeds, not comfortable with certain breeds, etc.

PERSONAL REFERENCE INFORMATION

Please supply names and telephone numbers for 3 personal references, including your veterinarian if applicable.

ALL OF THE INFORMATION, I HAVE PROVIDED ON THIS APPLICATION IS, TO THE BEST OF MY KNOWLEDGE, TRUE AND COMPLETE. I UNDERSTAND THAT FALSIFYING ANSWERS ON THE APPLICATION, OR AT ANY OTHER TIME DURING THE FOSTERING PROCESS, DISQUALIFIES ME FROM FOSTERING.

Signature of applicant: _____ Date: _____

Humane Society of El Paso
Foster Care Agreement

I understand and agree to all information provided to me in my application process. If the animal I foster is on medication, I will continue the medication as directed. I will not let the animal out loose by itself. I understand the foster animal is the property of the HSEP and I will not sell, trade or dispose of the animal. I understand the importance of my own animals being up-to-date on all standard vaccinations and have provided the HSEP with a current shot record for each one.

I understand that the Humane Society, not I, will choose an appropriate animal for me to foster pertaining to my preference. If for any reason I cannot care for a foster animal I must immediately notify the Foster Coordinator, for replacement of the animal into another foster home.

I understand that if veterinary care is necessary for my foster animal, I will contact HSEP as soon as possible. I understand that HSEP will not assume responsibility for any medical expenses that occur while the animal is in my care unless instructed by HSEP.

Should the foster pet need grooming, I understand that the HSEP will take the pet to a groomer prior to me taking the foster pet home. I, however, understand, that keeping the pet clean is my responsibility. If the pet in my care needs professional grooming, I will contact the Humane Society Foster Coordinator to set up an appointment with a groomer.

I understand that although the HSEP takes reasonable care to screen animals for foster care placement, it makes no guarantee relating to the animals' health, behavior or actions. I understand that I receive foster care animals at my own risk and can reject or return any animals for which the HSEP has asked me to provide care. I indemnify and hold the HSEP free and harmless from all liability arising out of any and all claims, demands, losses, damages, action, judgment of every kind and description which may occur to or be suffered by me, members of my household, my own animals or any third parties by reason of activities arising out of this agreement. I release the HSEP from responsibility for any diseases that may be contracted by my resident animal(s) from the foster animal and that I am responsible for any subsequent veterinary expenses for my own animal.

I understand and agree that any breach of the conditions of this Foster Care Agreement shall be cause for immediate cessation of all services herein. The HSEP reserves the right of immediate possession of the fostered animal(s).

I understand the risks and possible financial burdens associated with fostering, and I agree that I will contact the HSEP should I wish to discontinue participation in the foster program. I understand that HSEP reserves the right to check on the welfare of any foster animal in my care and that if I don't comply with the guidelines HSEP has the right to enter my property and reclaim any foster animal from me, I waive any claim to trespassers.

I understand that failure to immediately contacting the HSEP on the termination and or not being on compliance of any of this agreement may result in legal actions to include but not limited to criminal charges.

Signature of Foster Parent

HSEP Representative

Date

Date