

**Sheboygan County Humane Society**  
3107 North 20<sup>th</sup> Street  
Sheboygan, WI 53083  
(920) 458-2012

**FOSTER APPLICATION**

Today's Date: \_\_\_\_\_

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

Address: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

**Names of other adults living in your household (provide first & last names, middle initial & DOB)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of children living with you: \_\_\_\_ Ages: \_\_\_\_\_

Do you Rent  or Own : a House  Condo/Town Home  Mobile Home  Apartment

***I am interested in/willing to foster the following animal types:***

**Canine**

**Feline**

- Pregnant with puppies/kittens
- Orphaned puppies/kittens
- Upper Respiratory Infection/Sick
- Ringworm/skin conditions
- Adults
- Litterbox issues
- Behavioral issues
- Under socialized

**LIST ALL PETS CURRENTLY LIVING IN YOUR RESIDENCE**

Pet's Name	Pet Type	Sex	Spayed/Neutered	Kept Where?	Age
_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	In <input type="checkbox"/> Out <input type="checkbox"/> Both <input type="checkbox"/>	_____
_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	In <input type="checkbox"/> Out <input type="checkbox"/> Both <input type="checkbox"/>	_____
_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	In <input type="checkbox"/> Out <input type="checkbox"/> Both <input type="checkbox"/>	_____
_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	In <input type="checkbox"/> Out <input type="checkbox"/> Both <input type="checkbox"/>	_____
_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	In <input type="checkbox"/> Out <input type="checkbox"/> Both <input type="checkbox"/>	_____

Present Veterinarian: \_\_\_\_\_ & Previous Veterinarian Used: \_\_\_\_\_

Under what name (including maiden name) are/were your pets listed? \_\_\_\_\_

Have you ever fostered animals before for any organization? Yes  No   
If yes, which organization?

What type of animals have you fostered in the past?  
\_\_\_\_\_

Are you willing to allow the SCHS staff to perform a home visit prior to being approved for fostering?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Are you willing to allow SCHS or potential adopters to visit the animal(s) in your home?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Are you willing to allow potential adopters to call you regarding your foster animal(s)?  
Yes \_\_\_\_\_ No \_\_\_\_\_

As a foster parent you will be required to keep your foster dog(s) on a leash or enclosed (within a fence adequate for the animal or in a home) at all times. Foster cats must be kept indoors at all times or placed in a kennel when take outside. As a foster parent, you may have an animal in your care for a short or extended period of time. This will frequently be determined when you receive an animal to be fostered. However, the amount of time is subject to change depending upon circumstances at the shelter. If you know that you will be on vacation during the period of time you are being asked to foster, you are obliged to inform SCHS. This will allow us to find the most suitable temporary accommodations for the animal(s). Additionally, while you are caring for foster animals, we may call you occasionally to check on the animal's progress and address any concerns you may have. As a foster parent, we want you to know that it is occasionally necessary to euthanize animals that have been in foster care. Although this is an option of last resort, it can occur. SCHS is not responsible for damages to personal property while caring for foster animal(s). All animals within the program are property of SCHS and must be returned when requested.

By signing this form, you are attesting that the above statements are true.

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

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