

## FOSTER / VOLUNTEER APPLICATION (circle one)

Name:		Email:			<u>-</u>		
Address:							
Cell:	Home:	Work:	(circle preferred #)				
Why would you like to fost	er/volunteer with us:						
Do you have any health re so, please describe:					(lifting, bend	ing, etc.) If	
Pet experience (crate train	ing, helping sick anim	nals, etc).:					
Please check all that apply My family Adults (#): Children (if so, gender and Experienced pet owners Allergy to pets(who?)		<ul> <li>I want to help</li> <li>Saturday adoption events</li> <li>Calling</li> <li>Fundraising</li> <li>Marketing</li> <li>Transportation weekdays</li> <li>Foster (complete other side)</li> <li>□</li> <li>I have pet carriers/crates</li> </ul>					
Please list your current pe	t information: Breed		Age	Spayed/ Neutered	Current vaccinations?	Heartworm prevention?	
			Phon	e:			
I,	ee to hold AA and its a a volunteer/foster. The understand that neithed by any animals that d release from liability sick or injured from a	his may include assistier AA nor any designa I come into contact wi AA and any other de ny animals as a result	blame ing in a ted ho ith duri signate of my	in the ever adoptions t sting orgar ing my volu ed hosting volunteer/	nt of damage hrough AA a nization is res unteer/foster organization	or injury as t local ponsible for work. I should I or	

If you would like to foster for us, please continue providing information on the opposite side.

## FOSTER / VOLUNTEER APPLICATION pt 2 – For FOSTERS

Yes, I want to foster! Here is more information about me:

dog/cat dog/cat dog/cat dog/cat dog/cat	I want to foster: Puppies / kittens Adults Females only Pregnant females Males only		Dog size: Small (5-2 Medium (i Large (40 Extra larg	20 lb) 20-40 -60 lb	o)		My home (foster): Rent Own House Apartment/Condo Mobile home		Swimming pool Fenced yard Fence height: Chain link Wood Other
Control Kitton According Head	at experience: tens lults ter box training elping sick animal roblem behavior" (des				Basic o Crate tr Helping Medicar	s hou bedi- ainir sick ting - m be	usetraining ence ng animal - tablets ehavior" (describe)		Dog/puppy Preferences Breeds preferred: Breeds declined: Activity Level: Hi / med / low Exercise plan:
	_								when
require	vay from home and d for some pets) erinarian:						- "		eling is encouraged, and may be
<u>Please</u>	read and initial				Foste	r ag	reement		
I h agents a resul I a I under superv I a to the a veterin I u in my fo If I includir	ereby agree that I a harmless from blar to fostering and/or gree to assume reststand there is limited is ion of the animal agree to share personattention of AA. In gree to provide or a gree to provide or a grey appointments. Inderstand that any coster care, I will be wish to adopt any and payment of the agree payment of the agree to grey and payment of the agree to grey	me ii r vol spon ed in arou onali arrar anin adop	n the ever unteering. sibility for formation and other a ty informa age transp mal I foster iect to lega al I foster tion fee.	the havailanima anima anima ation a cortat r remal rec	damage numane lable ab als and i and any ion as n nains the course. nderstan	or in care cout family cor need need need need need need need nee	njury to me, any other and treatment of the animal and I will members. Incerns regarding subject for the animal will perty of AA. If I falsomers subject to the animal will member to the animal will member the animal will be an animal will be animal	ther the the uspe thile dop	AA) and agree to hold AA and its persons, animals or property as foster animal while in my care. It responsible for providing close ected health or behavior issues in my care to events and or release back to AA any animal of the other application process of longer able to foster.
Signatu	ıre:						Da	te: .	