



Franklin County Animal Shelter

550 Industry Rd. Farmington, ME
(207)778-2638 fcanimalshelter.org

Foster Application

Name

:

Date:

Street Address:

City, State, Zip:

Primary Phone

#:

Secondary Phone

#:

Email Address:

Do you...? (circle
one)

Rent Own

Landlord Name & Phone #:

Veterinarian's Name & Phone #:

What kind of animal are you interested in fostering? (Check all that apply)

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Pregnant Cats | <input type="checkbox"/> Adult Dogs |
| <input type="checkbox"/> Kittens WITH Mamacat | <input type="checkbox"/> Puppies |
| <input type="checkbox"/> Kittens WITHOUT Mamacat | |
| <input type="checkbox"/> Bottle-fed Kittens | |
| <input type="checkbox"/> Feral Kittens | |

Is there a separate area where foster pets could be kept? YES NO

If yes, please describe area:

Are there any times of the year you cannot foster?

Why are you interested in fostering?

Foster Home Profile

To best match you with a suitable animal, please tell us more about you, your family, and your home.

Who lives in your household? (Full time and part

Age	Gender

List pets living in your home below:

Name of Pet:	Type & Breed	Age	Sex	Fixed?	Vaccines Current?

Have you had experience with...? (Check all that apply.)

- Raising newborn kittens
- Bottle-feeding kittens
- Socializing feral kittens/cats
- Caring for animals with special medical needs

Anything else we should know?

Continues on back



Foster Agreement

Due to the high cost of veterinary care and the discounts we can get by providing care at the shelter, we require foster parents to approval from a staff member before seeking veterinary care for a foster animal. We can be reached on the main shelter line from 7 am to 5 pm and on our emergency foster line during all other hours.

I understand. _____
Initials

We require that all personal pets living in a foster home are up to date on vaccinations and flea preventatives before sending foster animals into the home. Your pets must be either currently up to date, or will be before accepting a foster animal.

I understand. _____
Initials

Despite vaccinations and other preventative measures, it is still possible that a foster animal could expose you or your pets to a disease or illness (including but not limited to ringworm, tapeworms, roundworms, rabies, upper respiratory infections, and kennel cough). You may risk exposure by fostering animals.

I understand. ~~_____~~
~~**Initials**~~

If you or your pets are exposed to a disease or illness from a foster animal, Franklin County Animal Shelter cannot accept financial, medical, or veterinary responsibility for any transmissions or associated care.

I understand. _____
Initials

Anyone who is pregnant, may become pregnant, or has a compromised immune system should consult their physician before agreeing to take in foster animals.

I understand. _____
Initials

If you become an approved foster parent, foster animals are approved to live in your home only.

I understand. _____
Initials

As a foster parent, you agree to follow all instructions given to you by Franklin County Animal Shelter staff and veterinarians regarding your foster animal(s) (including feeding schedule, medication instructions, immunization/treatment schedule, and when to bring the animal(s) back).

I understand. _____
Initials

All foster cats and kittens must be kept indoors at all times, and all foster dogs must be on leash or otherwise contained while outdoors.

I understand. _____
Initials

Unless in an Adoption Ambassador home, Franklin County Animal Shelter is responsible for adoption screening and placement for all foster animals. Fosters and friends or family members of foster parents will go through the regular adoption process if they are interested in adopting a foster animal.

I understand. _____
Initials

Unfortunately it is not uncommon for foster animals (in particular, kittens) to die in care or need to be humanely euthanized due to an illness that we cannot treat. It is important to be prepared that some of the animals may not survive in foster care.

I understand. _____
Initials

Foster Signature

Date

Staff Ini-