
CONTACT INFORMATION

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Primary Phone #: _____ Secondary Phone #: _____

Emails: _____

Occupation & Company Name : _____

HOUSING & FAMILY

Ages of all people living in household, including yourself: _____

Housing type (If renting, please provide landlord's name and phone number): _____

Do you have a fenced yard? (Fence is not required for all dogs) _____

Do you currently have any pets, or have you in the past? _____

If you have pets, what are their names, ages and breeds? _____

If you have pets currently, are they up-to-date on vaccinations? _____

If you have pets, are they on heart worm preventative? What kind? _____

If you have pets, have they been spayed/neutered? If not, why? _____

Have you ever surrendered a pet? If so, why? _____

How many hours a day will the dog be alone? _____

Where will your foster primarily live? ☐ Inside ☐ Outside ☐ Both

If you answered both to the above, where will the foster be sleeping? _____

FOSTER PREFERENCES

Do you have a preference in sex of foster? _____

Are you willing to foster all ages? If not, what ages will you foster? _____

What size dog are you willing to foster? _____

To ensure we have the best fit for our foster homes, please describe the types of dog you are willing to foster: _____

We cannot guarantee a dog to be housebroken, are you equipped to train with love and patience? Instruction, guidance and pee pads provided. _____

Have you had experience with emotionally, physically neglected or abused dogs? _____

Have you crate trained a dog before? If not, are you open to learning if needed? _____

VETERINARIAN REFERENCE

Name: _____

Address: _____

Number: _____

REFERENCES

1.

Full Name: _____ Phone: _____

Address: _____

Relationship: _____

2.

Full Name: _____ Phone: _____

Address: _____

Relationship: _____

FOSTER AGREEMENT

I understand that under no circumstances do I have permission to keep, withhold, adopt out, give away, hide, relocate the foster animals under my care. Permission to take fosters on vacation is required. I agree to provide this animal with adequate food and water, shelter from the elements, daily exercise and kind treatment at all times. I agree to not leave animals on any tethering device or outside for prolonged periods of time. (Greater than 3 hours) I agree to follow all state and local animal laws. I agree to monitor the health of the foster animal and contact Genesis ONE Animal Rescue if there is suspected illness or medical issues. I agree to provide the foster animal with transportation for all necessary veterinary care, if transportation is not available. I agree that Genesis ONE Animal Rescue is not liable for any claims, demands, damages, losses, costs or expenses incurred resulting from or relating to my fostering of animal(s) under the terms of this agreement. I agree to contact Genesis ONE Animal Rescue immediately if I can no longer foster and I will return the animal immediately. ALL FOSTER ANIMALS WILL BE SUBJECT TO VACCINES AND SPAY/NEUTER APPOINTMENTS IF NOT ALREADY PERFORMED.

Kaci Miller, Director
Sterrett, AL. 35142
205.234.3196

Foster signature