



Habersham Humane Society
P.O. Box 1442
Clarkesville, GA 30523
706-839-1040

Foster Program Application

Name: _____ Home Address: _____
Phone No(s): _____ (H) _____
_____ (C) Email: _____
_____ (Other) Other Caretakers in the Home: _____
Best Call Time: _____

General Inquiries

- 1) What type of residence do you currently live in?
 House Apartment Condo/Townhome
 Trailer Other: _____
- 2) Do you Rent or Own?
If you rent does the lease allow pets? Yes No
Have you already paid a pet deposit? Yes No
- 3) How long have you lived there? _____
- 4) How many times have you moved in the past 5 years? _____
- 5) Do you have a fenced in yard? Yes No
If so, what kind of material and how tall? _____

- 6) How many people currently live in the household? _____
- 7) Are there any children in the house? Yes No
If so, how many and what are their ages? _____

- 8) Is everyone currently residing in your household aware you have
chosen to foster a dog? Yes No
- 9) Are there any pets in the household? Yes No
If so what are their species, breeds & ages?

- b) Name: _____
Breed: _____

- Cat Dog Bird Other: _____
Age: _____ Sex: _____ Spay/Neutered
- c) Name: _____
Breed: _____

- Cat Dog Bird Other: _____
Age: _____ Sex: _____ Spay/Neutered

- a) Name: _____
Breed: _____
 Cat Dog Bird Other: _____
Age: _____ Sex: _____ Spay/Neutered

10) Where will the foster animal stay....

Basement Other: _____

a) While you are in the house?

- In crate Outside in fenced yard while monitored Single Room
- In open Outside in fenced yard unmonitored Free Run of Home
- Garage Gated into a specific room (i.e. Kitchen)
- Basement Other: _____

11) What kind of training/discipline do you use and/or believe in?

- Positive Reinforcement Spray Bottle Treats Crates
- Non Aggressive Verbal Aggressive Verbal Swatting
- Choker Collars/Chains Locking Dog in Room (i.e. garage)
- Other: _____

b) While you are out of the house or at night?

- In crate Outside in fenced yard while monitored Single Room
- In a pen Outside in fenced yard unmonitored Free Run of Home
- Garage Gated into a specific room (i.e. Kitchen)

12) Are you willing to allow a staff member or volunteer of Road Trip Home Rescue to complete an inspection of your home as needed?
 Yes No

References

Please list two references (outside of your own home):

- 1) Name: _____ Relationship: _____
 Phone: _____ Best Time to Contact: _____
- 2) Name: _____ Relationship: _____
 Phone: _____ Best Time to Contact: _____

Please list current veterinarian information if applicable:

Name of Clinic: _____
 Address: _____ Phone: _____
 _____ Fax: _____
 Veterinarian's Name: _____ Email: _____

Please list any specific questions and/or concerns about our program:

Final Agreement

By signing below I understand I am stating that all information provided on this form is truthful and accurate to the best of my knowledge.

_____ I understand that by agreeing to foster an animal through Habersham Humane Society that I am required to follow their standards and policies to the best of my ability while their animal is in my care. I am acknowledging that I have been made aware either verbally or in written format of these general standards and policies at the time of signing.

_____ I understand that while a foster animal is in my care that any necessary medical treatment will be handled at the veterinarian of Habersham Humane Society's choosing.

_____ I understand that if by any chance I build a special bond with any animal I am fostering I will still return it to Habersham Humane Society no later than the date of the assigned transport and understand that Habersham Humane Society does not allow for local adoptions.

_____ I understand that foster animals have unknown backgrounds and unknown health histories. I am taking a foster animal into my house at my own risk. Habersham Humane Society is not physically or financially responsible for any illness, injury or death inflicted on my personal animals by the foster animal. I will take extreme caution when introducing the foster animals to my personal animals and my children and other family members.

_____ I understand fully that any falsification of information provided or major violations of Habersham Humane Society's policies and procedures are cause for termination of my role as a foster home. I also understand that any violations of state or federal laws especially in regards to the treatment and/or care of animals will not only terminate my role as a foster home but also be reported to local authorities.

_____ I understand that Habersham Humane Society reserves the right to move an animal to another foster home as we see fit.

_____ I understand that I may not directly contact the northern partner shelter. If I am wanting an update on my foster animal, I will go through my Habersham Humane Society representative.

Foster Volunteer's Signature

Date