## FURGET ME NOT ANMAL RESCUE

## **FOSTER APPLICATION**

Name:	Phone:				
Address:					
Email:					
Please list all the member	s of your h	ousehold	l:		
Who will be primary care	giver of ca	t?			
Do you own or rent your	home?	Own [	Rent	If renting, does your le	ase allow pets? Yes No
Please list all the pets you	ve had in	the past	five years:		
Type of Pet	Age	Sex	Spayed/ Neutered	# of years in your home	Is the pet still with you? If not, why?
My veterinarian is:					
Are you able to transport	animals to	veterinaı	ry appointme	nts or adoption events? [	Yes No
Which of the following w	ould you b	e interes	ted in fosterir	ng?	
Pregnant mum		Orph	aned young	Health concerns	Socialization
☐ Mum with nursing kit	tens	Only	healthy cats/	kittens requiring a tempor	ary home
Please read and sign:					
☐ I have completed this a	application	truthfull	y and fully u	nderstand the foster proce	SS.
☐ I will arrange for trans	port of the	animal to	o scheduled v	et appointments or the en	nergency vet if needed.
In the event that the m			_	Me Not decide my foster	requires euthanizaton for
Furget Me Not has per	mission to	contact 1	my reference	regarding my capacity to	care for an animal.
Reference name, phone n & relationship to me	umber				
Signature:				Date:	

Please email the completed and signed application to