**The Triple BBB Cat Sanctuary**

**Foster Care Application and Agreement**

Thank you for your interest in fostering with The Triple BBB Cat Sanctuary. Our sanctuary is committed to providing loving, temporary homes for cats in need of medical care, socialization, or special attention.

**Contact Information**

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Date of Application:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Primary Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Circle one: Home / Cell / Work  
**Alternate Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Circle one: Home / Cell / Work  
**Email Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Occupation/Employer:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Personal Veterinarian:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Vet Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Vet Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Foster Interest**

What animals are you willing to foster? (Check all that apply)  
☐ Kittens needing bottle-feeding  
☐ Cats recovering from surgery  
☐ Pregnant cats or moms with litters  
☐ Socialization cases  
☐ Orphaned kittens

**Housing Information**

**Do you own or rent your home?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
If renting, **Landlord Name & Contact:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Do you have children at home?** Ages: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Do other children visit?** How often? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Do you have a fenced yard or enclosed area for cats?**  
If not, how will you ensure safety? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are you able to isolate foster cats from your pets if needed?**  
☐ Yes ☐ No — Explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Pets in the Home**

List all pets in the home. Include:

1. Name
2. Species/Breed
3. Age
4. Sex (Spayed/Neutered?)
5. Current vaccinations
6. General health status

| **Name** | **Species/Breed** | **Age** | **Sex** | **Vaccinated?** | **Health Status** |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

(Add more rows or attach additional sheets as needed)

**Foster Experience & Preferences**

**Have you fostered before?** ☐ Yes ☐ No  
If yes, describe your experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Why did you stop (if applicable)?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have experience with:  
☐ Shy Cats  
☐ Fearful Cats  
☐ Aggressive Cats  
☐ Medical Aftercare  
☐ Bottle Feeding  
☐ Pet-on-pet aggression

**List any limitations (time, space, allergies, etc.):**

**Are you willing to follow dietary guidelines or use sanctuary-provided food?**  
☐ Yes ☐ No

**Have you completed any training (Pet First Aid, animal behavior, etc.)?**  
☐ Yes ☐ No – If yes, describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Do you have a crate or isolation room available?** ☐ Yes ☐ No

**References**

Please list 3 personal references (name & phone/email) who can vouch for your ability to provide a safe and loving foster home:

**Terms of Agreement**

By signing below, you agree to the following:

* All animals remain the property of The Triple BBB Cat Sanctuary.
* You will provide safe, clean, and loving care including food, water, and shelter.
* All veterinary care must be pre-approved by sanctuary staff.
* You may not rehome or transfer any foster animal without sanctuary approval.
* You agree to return animals to the sanctuary if requested or if unable to continue fostering.
* You certify that no one in the household has been convicted of animal cruelty, neglect, or abuse.
* You agree to allow home visits by Triple BBB Cat Sanctuary representatives.
* You agree to hold Triple BBB Cat Sanctuary harmless for any injury or damages resulting from fostering.

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Printed Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For Sanctuary Use Only**

Date Received: \_\_\_\_\_\_\_\_\_\_\_  
Landlord Check: \_\_\_\_\_\_\_\_\_\_\_  
Reference Check: \_\_\_\_\_\_\_\_\_\_\_  
Veterinarian Check: \_\_\_\_\_\_\_\_\_\_\_  
Interview/Home Visit Notes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Approved: ☐ Yes ☐ No  
Foster Coordinator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_