



PAWS 2 THE WALLS CAFE FOSTER APPLICATION & AGREEMENT PACKET

501(c)(3) Non-Profit Animal Rescue

Where Every Paw Is Family



Jacqueline
MOON
CEO & FOUNDER

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SERVING OUR
COMMUNITY WITH
LOVE & COMPASSION

PAGE 1 APPLICANT INFORMATION

APPLICANT INFORMATION

Full Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Alternate Phone: _____

Email: _____ Age: _____

ANIMAL INTERESTED IN FOSTERING

Name/Description: _____

HOME VISIT AUTHORIZATION

Are you willing to allow a representative of Paws 2 The Walls Cafe to visit your home by appointment?

☐ Yes ☐ No

If No, Why? _____

HOUSING INFORMATION

Do You: ☐ Own ☐ Rent

If Renting: _____ Landlord Name: _____ Landlord Phone: _____

May we contact your landlord? ☐ Yes ☐ No

Describe your backyard (if fostering dogs): _____

HOUSEHOLD INFORMATION

Please list all adults in the home and their relationship to you:

Does anyone smoke indoors? ☐ Yes ☐ No

Does anyone have allergies to animals or pet dander? ☐ Yes ☐ No

Are there children under 18 in the home? ☐ Yes ☐ No

If yes, please list ages: _____

Have you ever fostered for another rescue? ☐ Yes ☐ No

If yes, which rescue? _____

PAGE 3 CURRENT PETS & VETERINARY INFORMATION

CURRENT PETS

Species	Breed	Age	Spayed/Neutered	Vaccinated

VETERINARIAN INFORMATION

Veterinarian Name: _____

Veterinarian Phone: _____

Veterinarian Address: _____

Additional Comments: _____

PAGE 5 FOSTER RESCUE COMMITMENT & AGREEMENT

RELEASE OF LIABILITY

I understand that fostering animals involves inherent risks, including but not limited to injury, illness, property damage, behavioral issues, bites, scratches, escapes, and unforeseen medical conditions.

I voluntarily assume all risks associated with fostering any animal through Paws 2 The Walls Cafe Rescue.

I agree that Paws 2 The Walls Cafe Rescue, its officers, directors, volunteers, representatives, fosters, and affiliates shall not be liable for any injury, illness, property damage, veterinary expenses, medical expenses, death, loss, or other incidents suffered by myself, my household members, visitors, animals, or property while a foster animal is in my care.

I understand rescue animals may have unknown medical or behavioral issues despite reasonable efforts to evaluate and treat them.

I release and hold harmless Paws 2 The Walls Cafe Rescue from any and all claims arising from participation in the foster program.

FOSTER AGREEMENT

- Foster animals remain the property of Paws 2 The Walls Cafe Rescue.
- All veterinary treatment must be approved by the rescue except emergencies.
- Foster animals may not be transferred, sold, given away, or rehomed.
- The rescue must be immediately notified of illness, injury, loss, theft, escape, or bite incidents.
- Foster supplies remain rescue property and must be returned.
- Adoption procedures apply if the foster chooses to adopt.
- Foster animals may attend adoption events as requested.
- Home visits may be conducted before or during fostering.
- Falsification of information may result in termination of foster privileges.
- I certify I am at least 18 years of age.

PAGE 2 FOSTER PREFERENCES & EXPERIENCE

FOSTER AVAILABILITY

How long can you foster? _____

TYPES OF ANIMALS YOU WOULD LIKE TO FOSTER (CHECK ALL THAT APPLY)

DOGS

- ☐ Senior Dogs
- ☐ Special Needs Dogs
- ☐ Adult Dogs
- ☐ Weaned Puppies
- ☐ Mom Dog & Puppies
- ☐ Bottle Baby Puppies

CATS

- ☐ Senior Cats
- ☐ Special Needs Cats
- ☐ Adult Cats
- ☐ Weaned Kittens
- ☐ Mom Cat & Kittens
- ☐ Bottle Baby Kittens

EXPERIENCE

If willing to bottle feed, what experience do you have?

FOSTER CARE ENVIRONMENT

Where do your pets primarily live? _____

Where will foster animals sleep? _____

Where will foster animals stay while you are away? _____

Have you ever given away a pet? ☐ Yes ☐ No

If yes, why? _____

Have you ever had a pet euthanized for reasons other than medical necessity?

☐ Yes ☐ No If yes, why? _____

PAGE 4 FOSTER HOME REQUIREMENTS

As a foster volunteer, I agree to:

- Provide a safe and loving home.
- Provide adequate food, water, shelter, and comfort.
- Provide proper socialization and enrichment.
- Keep foster dogs secured by leash or contained area.
- Keep foster cats indoors except during transport.
- Attend approved veterinary appointments.
- Make foster animals available for adoption events.
- Obtain approval before any veterinary treatment except emergencies.
- Cooperate with home visits and rescue representatives.
- Understand all foster animals remain property of Paws 2 The Walls Cafe.

CERTIFICATION

By signing, I certify that the information provided is truthful and complete.

(Certification continues on Page 5)

PAGE 6 SUPPLY REQUEST & SIGNATURE PAGE

SUPPLY REQUEST

- ☐ Food
- ☐ Crate
- ☐ Puppy Pen
- ☐ Gate
- ☐ Toys
- ☐ Blankets
- ☐ Towels
- ☐ Litter
- ☐ Leash
- ☐ Collar
- ☐ Harness
- ☐ Medical Supplies
- ☐ Other: _____

SIGNATURES

Applicant Signature: _____

Print Name: _____

Date: _____

Witness Signature: _____

Rescue Representative: _____

Date: _____



ADOPTIONS



COMMUNITY EVENTS



MAKING A DIFFERENCE

WWW.PAWS2THEWALLSCAFE.COM

