

Foster and Adoption Application

Date:				
Name:				
DOB:				
Address City/ State,	[/] Zip:			
Email:				
Employer Phone nu	mber:			
How long have you	worked there? :_			
How did you hear a us?:				
lives. When you fos and attention, eithe truly heal and mend fostering; however, Adopting an animal	ter, you agree to er for a predeterm d broken bodies a we appreciate if is a meeting of th	take a homeless animal int nined period of time or unt nd spirits both human and the foster parent provides	als to their forever and happily evento your home and give them love, til the animal is adopted. Fosters' of animal. There is no donation for a food at your own cost for foster animal. It is a lifetime commitment to.	care care car animals.
2Sisters Cat Sanctu	ary thanks you fo	r your interest in one of ou	ur animals. To assist us in continui	ng our
	-	requests Adopter pay an ac will be reimbursed or	doption donation of nce 2Sisters Cat Sanctuary receive	es proof
the pet was spayed,	/neutered. The do	onation helps 2Sisters Cat S	Sanctuary with expenses incurred feeding and care of other animal	by
	e best pet to you		are for an animal and helps 2Siste completing an application does not	

Step 1: Personal Information

	A. Are you interested in fostering or adopting?
	B. What animal are you interested in fostering/adopting (description or name if already identified):
	C. Have you ever fostered for another rescue? (Circle one) Yes No
	If so, state name of organization:
	D. When are you ready to adopt or start fostering?
	E. If you are fostering, is there a specific time-frame for which you would like to foster? :
Step 2:	Residence Information
	F. Do You: Own or Rent:
	If you rent or live with family, please fill out the following.
	a. Property Owner Name:
	b. Phone No.:
	c. Are Pets Allowed?
	H. Type of Residence (house, apartment, etc.):
	I. Do you have a yard? (Circle One) Yes No
	If Yes, describe your yard (size, fencing, etc.):
	K. In lieu of a home visit, please attach/send pictures of your house and yard.
Step 2:	Household Information
	A. Please list all persons living with you, their ages, and their relationship to you.
	a
	b.

	d		
В. \	Who will be the prin	nary caretaker?	
	Do you have regular		ors with whom your new animal must get
	f yes, please elabora ner animals, children		re that the animal selected will get along w
 D.	ls anyone in your ho	ousehold allergic to ani	mals?
	If so, how do you pla	an to resolve this?	
	care	le (active/hiking, prefe	
	care Do you currently have Animal Type:	ave other animals livir	ng in your household? (please list below)
	care Do you currently he Animal Type:	ave other animals livir Breed:	ng in your household? (please list below)
	care Do you currently he Animal Type: Age: Male/Female:	ave other animals livir Breed:	ng in your household? (please list below)
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	Do you currently he Animal Type: Male/Female: Animal Type: Male/Female: Male/Female: Male/Female: Male/Female: Animal Type:	ave other animals living Breed:	ng in your household? (please list below) Altered? Altered?

	Animal Type:
	Age: Breed:
	Male/Female: Altered?
	Up To Date with Vaccinations?
В.	Have you ever had a pet before? If you no longer have this animal, please give circumstances or cause of death:
C.	Have you ever taken a pet to a shelter?
	If yes, please explain why and when:
Ε.	Do you agree to take the animal for yearly and any necessary veterinary checkups? Who is your local veterinarian? (If you do not have one, we are happy to provide
re	Who is your local veterinarian? (If you do not have one, we are happy to provide commendations.)
re Na	Who is your local veterinarian? (If you do not have one, we are happy to provide
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re Na F. G.	Who is your local veterinarian? (If you do not have one, we are happy to provide ecommendations.) ame:Phone no: What kind of food do you expect to feed? Fosters - are you willing to provide food at your own cost?
re Na F. G. H.	Who is your local veterinarian? (If you do not have one, we are happy to provide commendations.) ame:Phone no: What kind of food do you expect to feed? Fosters - are you willing to provide food at your own cost? How many hours per day will the animal be alone?
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Re	
	elationship to applicant:
2.	Name:
Pl	none number:
Re	elationship to applicant:
3.	Name:
Pl	none number:
Re	elationship to applicant:
Please	e sign and date below if you agree with the following statement:
"I cert	ify that the above information is true and accurate to the best of my knowledge, and I
	stand that my completion of this form in no way obligates 2Sisters Cat Sanctuary to foster r adopt an animal to me."
and/o	stand that my completion of this form in no way obligates 2Sisters Cat Sanctuary to foster
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