

The Humane Society for Inland Mendocino County
9700 Uva Drive Redwood Valley, CA 95470
Phone: (707)485-0123 Fax (707) 485-0351
Email: www.mendohumanesociety.com or hsimc@pacific.net

Foster Parent Application

Name: _____ Date: _____

Main Phone: _____ Secondary Phone: _____

Email: _____

Address: _____

1. Have you previously fostered for any other shelter or rescue? YES/NO

IF yes, Where & When? _____

2. Do you rent or own your home? _____

3. What type and height of fencing do you have? _____

4. How long have you lived at the address listed above? _____

5. How many adults live in the household? _____

Children? _____ Ages of children? _____

6. Who will be responsible for the foster animals' care?

7. Have you ever adopted an animal from a shelter? When? Where? Dog? Cat? Other?

8. Have you ever returned an animal to a shelter? When? Where? Why? Dog? Cat? Other?

9. If you currently have pets, who is your Veterinarian?

Please list all your current pet/s below, including small caged animals and barnyard animals.

| Type of pet | Age | M/F (Spayed/Neutered) | Years with you? |
|-------------|-----|-----------------------|-----------------|
|-------------|-----|-----------------------|-----------------|

| | | | |
|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Please circle the animals that you have experience with or knowledge of and the space to foster.

Dog
Puppies

Cat
Kittens

Special Needs Animal
Senior Animal

Mother with Kittens
Mother with Puppies

10. Can you give medications (pills/liquids) both? **YES NO** _____

11. Length of time during the day that the animal will be left alone? _____

12. Where will the animal be housed during the day?

13. Where will the animal be housed at night?

Foster Signature: _____

Date _____

HSIMC Rep: _____ Date _____

Office use only~ Approved _____ Denied _____