| Laguna ' | Woods | Cat Club | - Foster | Application | and Agree | ment - Re | evised 03/01/2021 |
|----------|-------|----------|----------|--------------------|-----------|-----------|-------------------|
| | | | | | | | |

Thank you for taking the time to complete this application. The Foster Program in Laguna Woods Village is supported by donations, a variety of fund raisers, and over 100 volunteers/members, and is a 501c3 Non-Profit Organization.

All our cats have been spayed or neutered, have current vaccinations, and are tested for FELV/FIV. If there are any health concerns, they are addressed prior to adoption.

| Name: | Age: | | Phone: | | | |
|--|-------------------------------|-------|---------------------------------|--|--|--|
| Address: | | | Cell Phone: | | | |
| | | | Email: | | | |
| How long have you lived at this | address? | | Do you own? | | | |
| Name of Spouse: | Age: | | Work Phone: | | | |
| | | | | | | |
| Do you live in an apartment? C | ondo/Co-Op () Mobile h | or | me? () Single family home? () | | | |
| Do you need the permission of | a landlord before bringing h | nor | me a new pet? Y / N | | | |
| Name of landlord: | | | Phone #: | | | |
| | | | | | | |
| Do you have any of the following: Open Patio/Balcony () Pet Door () Unscreened Windows () | | | | | | |
| Any other means a cat could o | access the outside Y () N (|) | | | | |
| Please explain: | | | | | | |
| Does anyone else live in the home? () Yes () No Ages and relation: | | | | | | |
| Name(s): Age(s): | | | | | | |
| Does anyone currently or plann | ing to live in the home suffe | er fi | rom allergies or asthma? Y/N | | | |
| | | | | | | |
| | _ | | | | | |
| Who will be responsible for the cat's care (feeding, cleaning litter, taking to the vet): | | | | | | |
| | | | | | | |
| Name of your Vet: Phone #: | | | | | | |
| | | | | | | |

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| Why do you want to foster a cat? | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| Litter boxes should be cleaned 1-2x a day, are you willing to do this? Y / N | | | | | | | | |
| How many hours a day on average will the cat be left alone? | | | | | | | | |
| What are your plans for a cat when you travel? | | | | | | | | |
| | | | | | | | | |
| Tell us about any current pets that live or visit the home? Cats (Ddgs () | | | | | | | | |
| Are they compatible with guest cats? Y / N | | | | | | | | |
| Have these pets been tested for FIV / FELV? | | | | | | | | |
| Are they all current with their vaccines? | | | | | | | | |
| Tell us about your past pets and why they are not currently with you. | | | | | | | | |
| | | | | | | | | |
| How long would you be willing to foster while we find their forever home? | | | | | | | | |
| | | | | | | | | |
| Would you be willing/able to help socialize a foster cat if necessary? Sometimes we will get a cat that has been traumatized if their owner has passed away or it has been let outside when no longer wanted. This is a rare situation; however, it does happen when families of a deceased member do not want to be responsible for rehoming. Y () N () | | | | | | | | |
| | | | | | | | | |
| At no time are our kitties allowed to be let outside or in an area of your home where they can escape through a window or door screen. Will you commit to and stand by this agreement? | | | | | | | | |
| Y()N() | | | | | | | | |
| For office use only: | | | | | | | | |
| Approved | | | | | | | | |
| By:Date: | | | | | | | | |
| Mail to: Jody Powers, Foster Director 121-C Via Estrada Laguna Woods, CA 92637 832-540-1063 | | | | | | | | |

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