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 501© 3 Non-Profit Organization. All our cats have been spayed or neutered, have current vaccinations, and 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? Condo/Co-Op() Mobile home?() Single family home?()			
Do you need the permission of a landlord before bringing home 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 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 planning to live in the home suffer from 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 #:	

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 () Dogs ()

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: Bev Elwell 3382-C Punta Alta Laguna Woods, CA 92637 215-896-7054

baelwell@outlook.com