



71 Industrial Park Drive
P.O. Box 1015
Waldorf, MD 20604-1015

301-645-8181

FOSTER CARE APPLICATION

Date: _____

Please indicate which type of animal you are interested in Fostering

- | | |
|---|--|
| <input type="checkbox"/> <u>Dog</u> <i>(If dog is checked, please read last page of app.)</i> | <input type="checkbox"/> <u>Cat</u> |
| <input type="checkbox"/> New born requiring bottle feeding | <input type="checkbox"/> New born requiring bottle feeding |
| <input type="checkbox"/> Young and self-feeding | <input type="checkbox"/> Young and self-feeding |
| <input type="checkbox"/> Mothers w/nursing young | <input type="checkbox"/> Mothers w/nursing young |
| <input type="checkbox"/> Injured/Sick may require medication | <input type="checkbox"/> Injured/Sick may require medication |
| <input type="checkbox"/> Under-socialized needing rehabilitation | <input type="checkbox"/> Under-socialized |
| <input type="checkbox"/> One at a time | <input type="checkbox"/> One at a time |
| <input type="checkbox"/> More than one | <input type="checkbox"/> More than one |

Please complete and return to the Humane Society of Charles County. All foster candidates will be evaluated based on the information provided on this application as well as an interview from a foster program member. HSCC may elect to do a home visit prior to approval. Once an application is approved, foster families will be contacted about animals in need of foster care.

Name of Applicant: _____

Address: _____
Street Address City State Zip

Contact Information: Cell Phone: _____ Home Phone: _____

Email Address: _____

KEEPING IN TOUCH:

Both Foster Care Programs (dogs/cats) have a closed designated Facebook Group Page. These pages help keep the Foster Coordinator and HSCC staff in touch with foster families and is a vital part of communication. Would you be able to participate on Facebook to be in touch with designated foster program staff/volunteers?

- Yes
 No (If no, what is another way to keep in touch with you? _____)



HOME INFORMATION:

RENTERS – If you rent your home, you may need special permission from your property manager/owner to house foster animals. If you rent please answer the following:

Landlord/Management Co. _____ Phone: _____

Are there any restrictions on the number and type of animal you can foster? Yes No

DESCRIBE HOME:

Apartment? House? Townhome? Fenced? Animal will be inside?

How many people live with you? Adults _____ Children _____ Ages of Children _____
If no children, do you have children visit your home? Yes No

FOSTERING QUESTIONS:

Is everyone in your household on board with fostering and understands that your foster animal might be adopted and live elsewhere? Fostering is a great way to give back to the animal community; however, children might not understand that an animal they have come to enjoy might live elsewhere. Statistics have shown that the more you foster, the easier it does become.

Have you ever fostered before? Yes No
If yes, please list types of animals and for what organization(s): _____

Are you able to arrange transportation for you and your foster pet(s) for medical care, adoption events, training, etc? Yes No
Will you be able to house the foster animals away from your current animals? Yes No
Do you have experience training or working with animals with behavioral issues? Yes No
Do you have experience working with animals with medical issues? Yes No
Will you be able to keep the foster animal indefinitely until adopted? Yes No

PERSONAL ANIMAL INFORMATION:

Provide information about the animals currently in your care. Which vet do you take them to and are they up to date on their vaccinations? (May we contact your vet for a reference?) Yes No

Type of Animal	Age	Veterinarian used	Up-to-date on Vaccines (please provide copy)	How long have they lived with you?



HUMANE SOCIETY
OF CHARLES COUNTY

Tell us more about the animals currently in your home.

Are the animals in your home currently spayed and/or neutered?

Yes

No

Do they get along well with other cats or dogs?

Yes

No

Will you be able to keep your personal animals separate from foster animals?

Yes

No

Describe any medical conditions your personal animals have, such as treatments, special diet, medications, etc. _____

TERMS AND CONDITIONS:

- I understand that the animal(s) will at all times remain the sole property of the Humane Society of Charles County (HSCC) during the time you are fostering the animal.
- I agree to provide the animal(s) good care, including at a minimum: adequate food, adequate water, adequate shelter inside that is properly cleaned, adequate space in the primary enclosure for the particular type of animal depending upon its age, size, species and weight, and adequate exercise.
- For Dogs Only – I agree to make it known as soon as possible when any behavioral issues with my foster dog is noticed.
- I agree to follow HSCC regulations on transportation and veterinary care when needed to prevent suffering or disease transmission.
- I understand that medicines and other supplies provided by HSCC are for use with foster care animals only, and are not to be administered to animals that are not the property of the HSCC.
- I understand that all veterinary care will take place at the HSCC clinic, and before taking the foster animal to any other clinic or vet care facility, understand that it must be pre-authorized by the appropriate HSCC employee in advance. I agree to personally incur the cost for any treatment that has not been so authorized.
- **I understand and acknowledge that I do not have any right or authority to keep, adopt, transfer, or place foster animals in other homes or with other individuals without the express knowledge and sign off from HSCC Executive Directors and/or staff of the HSCC.**
- I agree that every animal I provide foster care for must be physically returned to the HSCC if a potential adopter is interested and will make my foster animal available to meet potential foster family. I also agree to return the animal(s) immediately if I am no longer able to provide adequate care.
- I agree to provide the appropriate staff members at the HSCC with the necessary information and materials at any time (such as fecal samples or temperature/weight measurements) to enhance the care that I am providing to the foster animal(s).
- I agree to hold the HSCC harmless from any direct or consequential damages arising out of this foster care arrangement.
- I acknowledge that the HSCC may terminate this foster arrangement or any other foster care arrangement at any time in its sole discretion.

I certify that no person residing in the household where the animals will be fostered has ever been charged with or convicted of animal cruelty, neglect or abandonment.

I certify that the above information is correct to the best of my knowledge. I also agree to follow all the rules, regulations and policies of the HSCC. No person residing in the household has ever been convicted of animal cruelty, neglect or abandonment .

Signature: _____ Date: _____
