

Clear Lake All Breed Rescue Foster Application

Contact Information

Name:		
Address:		
City:	State:	Zip:
Home Phone:	Work Phone:	
Best Time to Call:	Email Address:	
Occupation:		
Spouse's Name (if applicable):		
Spouse's Occupation (if applicable):		

Personal References

Reference 1

Name:	
Address:	
Phone /	Email Address:
Relationship:	

Reference 2

Name:	
Address:	
Phone /	Email Address:
Relationship:	

Application Questions

1. Why do you want to foster a dog?
2. Description of Residence: House Apartment Mobile Home Condo
 Other (please describe)

3. Do you: Rent Property Owner Name: _____
 Phone: _____
 Own Length of time at current residence: _____
4. Do you have a fenced yard? Yes No Type: Wood Privacy Chain Link
 Height of Fence: Iron Other (please describe) _____
5. Number of people in household: Adults: _____ Children: _____
6. Ages of children: _____
7. Are all members of your household aware that you would like to foster a dog? _____
8. Are you willing to let a representative of CLABR visit your home by appointment?
 Yes No If no, why not? _____
9. Who will care for this dog?
10. Who will support this dog financially? Myself Spouse Parents Family
 Friend
11. Where will you keep this dog? Fenced Yard Tied Outside
 Loose Outside Kennel/Crate Inside
 Garage Outside Kennel/Run
 Inside home Patio/Balcony
 Other (please describe) _____
12. Where will you keep this dog at night? Fenced Yard Tied Outside
 Loose Outside Kennel/Crate Inside
 Garage Outside Kennel/Run
 Inside home Patio/Balcony
 Other (please describe) _____
13. Where will you keep this dog when you are not home? Fenced Yard Tied Outside
 Loose Outside Kennel/Crate Inside
 Garage Outside Kennel/Run
 Inside home Patio/Balcony
 Other (please describe) _____
14. How many hours, on average, will this dog spend alone? _____
15. How many hours, on average, will this dog spend outside by itself? _____
16. If you do not have a fence, how will you handle this dog's exercise and toilet duties? _____

17. Do you ever walk your current dog without a leash? Yes No

If **YES**, under what conditions? (please describe)

18. Please list all dogs and cats currently living at your address and any pets you have owned in **the last 10 years**:

Species	Breed	Name	Age	Sex	Neutered	Vaccinated	Currently in Home?
				<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

19. What happened to pets that are no longer with you?

20. What brand of dog or cat food do you feed your dog/cat?

21. Do you agree to allow potential adopters to come meet with you and your foster dog?
 Yes No

22. Will you accept a dog that needs additional training? Yes No

23. Please describe your training plans: _____

24. Would you be willing to provide transportation for the foster dog? (vet appointments, adoption days, permanent homes) Yes No

25. Indicate the number of dogs you can foster at one time:

26. Do you live in a community where either deed restrictions or ordinances for the number of dogs allowed on the property?

- Briefly indicate the nature of these restrictions:

27. Please describe what types of dogs you would be willing to foster (age, sex, breed, size, temperament)

28. Are you willing to submit written bi-monthly reports on the status of the foster dog in your care?

Yes No

29. Please describe the extent of care that you are willing to provide should your dog have special medical needs now or later in life:

30. Will you have your dog vaccinated annually by a veterinarian? Yes No

Comments: _____

31. Please describe what you know about the **causes** of heartworm disease:

32. Please describe what you know about the **prevention** of heartworm:

33. Will you maintain your dog on heartworm preventative? Yes No

34. Will you maintain accurate veterinary records for the foster dog placed in your care? Yes No

35. Do you currently have a veterinarian? Yes No

Vet's Name:
Address:
Phone:

I certify that the above information is true and I am aware that false information may result in nullifying this application. I certify that my purpose in acquiring this foster dog is to provide a nurturing environment for the foster dog to reside while s/he is rehabilitated into an adoptable pet. I am not obtaining this dog for use in research. This foster dog will reside in my home as a pet. I will provide adequate food, water, shelter, training, affection, and medical care. I understand that I will be required to relinquish the foster dog placed in my care when Clear Lake All Breed Rescue has approved a permanent home for the foster dog. Should I decide to retain possession of the foster dog, I will be required to submit to the same screening process as an adopter and pay an adoption fee. I will also be required to sign an Adoption Contract. I will submit bi-monthly report of the dog's health and progress throughout the time the foster dog is in foster care with me.

I understand that Clear Lake All Breed Rescue is a referral service and is not responsible for the accuracy of information received about the temperament, habits, or physical condition of foster dogs available for acquisition. Clear Lake All Breed Rescue is not responsible for any damage, accident, or injury resulting from the placement of a foster dog into my household. If any lawsuit should result from this foster dog acquisition, acquirer agrees to pay all court fees.

I will notify Clear Lake All Breed Rescue when I can no longer foster the foster dog.

I am in full agreement with these terms.

Applicant Signature

Date

WE RESERVE THE RIGHT TO REFUSE ANY APPLICANT

Please return signed and completed application to:

Clear Lake All Breed Rescue

P. O. Box 591270

Houston, Texas 77062

Or email to: **info@clearlakeallbreedrescue.org**

Or FAX to: **832-201-5667**

Thank you for your interest in fostering a homeless pet! You will be contacted shortly after receipt of paperwork. We look forward to working with you.