



Softpawsrescue@gmail.com • (707) 349-3026 Victoria (SPR CA Rescue President)

Foster Parenting Agreement

Foster Parent Name: _____ Phone: _____

Is your foster application on file? Yes___ No___ Are you at least 21 years old? Yes___ No___

I am aware that if I am a renter Soft Paws Rescue will contact my landlord to be certain that I am allowed to keep dogs/cats in my living space. I agree that I will be open to a home visit if necessary. When the foster pet is placed in a "forever home" or is returned to the shelter, I will fill out a short assessment regarding the pet and how it behaved in my home. This information is invaluable for the pet's adoption, rescue workers, and the future of the pet.

- 1. I agree to provide this pet, _____, with loving care, including, but not limited to, food, water, shelter, medication (when required), and proper exercise and socialization. I agree to use positive reinforcement as a training tool and will seek advice if I am unsure how to do so, or if other methods are needed.
2. While the dog is in my care, I will always keep him/her safely leashed at all times. This means no "off leash" at any time unless in the living space or in a secure fenced-in area. I also understand that it is safest to gradually allow my own pets to interact with the foster animal(s) during their initial period together. It is also understood that my own pets should be kept up to date on their vaccines before and while a foster animal is in my care.
3. I understand that the foster animal remains the sole property of Soft Paws Rescue and I do not have the authority to keep or place my foster animal in any other home or with other individuals. I will be asked to provide contact information including phone numbers and email address so that potential adopters may have the opportunity to meet the foster animal while it is still in my care, after an approved application is received if I am comfortable with such. I will also try to attend any free training classes that might be provided from time to time by SPR.
4. If a problem arises with my foster that I am unable to handle, I understand that Victoria, President of SPR is my point of contact. They can be reached at Softpawsrescue@gmail.com. I can also call them at 707-349-3026 and leave a message, TEXTING IS ALSO ALLOWED. Any medical concerns should be addressed to Victoria immediately at Softpawsrescue@gmail.com or Call/Text 707-349-3026 and leave a message.
5. If I need to return my foster animal for any reason I will make every attempt to provide SPR with as much notice as possible to insure there is space available at Soft Paws Rescue with another foster home. This also applies to temporary returns in the case of vacations or an emergency situation. We require at least one week GRACE period to find an alternate placement if your foster dog needs to be returned, so please plan for having a separate area to hold the dog if needed.
6. I assume all risks involved with serving as a foster parent for this animal listed above. I agree to indemnify and hold Soft Paws Rescue and its Board of Directors, employees and volunteers and their heirs and successors harmless from all liability, loss, injury or damages, including negligence and other causes of action, debts, claims, and demands of every kind which I have now or which may arise out of or in connection with my participation arising out of or in connection to the animal listed above in line #1.
7. If I decide to adopt my foster animal, I agree to pay the standard adoption fee for my foster animal.

Foster Parent Name: _____ (please print) _____ (Phone Number-Preferably Cell to text)

Foster Parent Signature: _____ Date: _____

Authorized Soft Paws Rescue Representative: _____ Date: _____

Thank you for helping this foster pet on their way to their new "forever home"

SOFT PAWS RESCUE FOSTER APPLICATION

Email To: softpawsrescue@gmail.com

Date:		Age of dog(s) desired:	
Oldest/Youngest dog considered:		Maximum number of dog(s) considered:	
Applicant Information			
Name:			
Address:			
City:		State:	Zip:
Telephone numbers: Home:		Work:	Cell:
E-mail Address:			Date of Birth:
Are you presently: <input type="checkbox"/> Employed Employer:			<input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Student
Position, if employed:			School, if student:
Number of people in household:		If children are in the household, please list ages:	
Are you or any member of your family allergic to pets: <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you been tested: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Does anyone in your household smoke? <input type="checkbox"/> Yes <input type="checkbox"/> No		If so, where?	
Co-Applicant Information			
Name:		Relationship:	
Telephone numbers: Home:		Work:	Cell:
E-mail Address:			Date of Birth:
Are you presently: <input type="checkbox"/> Employed Employer and position:			<input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Student
General Information			
Type of residence: <input type="checkbox"/> House <input type="checkbox"/> Apartment <input type="checkbox"/> Condo <input type="checkbox"/> Mobile Home <input type="checkbox"/> Farm/Barn			
If rental, are cats allowed?: <input type="checkbox"/> Yes <input type="checkbox"/> No		Size Restrictions? <input type="checkbox"/> Yes <input type="checkbox"/> No	Max. Size:
If rental, are dogs allowed?: <input type="checkbox"/> Yes <input type="checkbox"/> No		Complex name/address:	
Manager/Landlord:			Phone number:
Current housing location: <input type="checkbox"/> City Limits <input type="checkbox"/> Outside City Limits			
Type of street: <input type="checkbox"/> Very busy road <input type="checkbox"/> Slight traffic <input type="checkbox"/> Residential area <input type="checkbox"/> Country road			Speed limit:
Where will foster animal live? <input type="checkbox"/> Inside only <input type="checkbox"/> Outside only <input type="checkbox"/> Mostly inside <input type="checkbox"/> Mostly outside			
Where will the foster animal spend nights? <input type="checkbox"/> Inside <input type="checkbox"/> Outside			
Will you allow the foster to run loose? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, where?	
How many hours per day will the foster animal be alone?			
Where will the foster animal stay when left alone? (Room, house, bathroom, crate, etc)			
Do you have a digital camera or phone to send photos by email?			

If you have to be away (vacation, business travel, etc.), who will care for the foster dog(s)?				
Have you fostered Dog(s) before? Please explain.				
Do you have any special skills or experience related to fostering?				
Are you interested in fostering a dog who needs socializing before being adopted?				
If so, approximately how many hours per day (average) will you have to work with a foster who needs socializing?				
Are you willing to foster the dog until Soft Paws Rescue is able to find a suitable permanent home?				
Are you able to take the foster dog(s) to a vet if and when necessary, provided SPR is responsible for these charges? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Do you know how to administer medications to a pet? <input type="checkbox"/> Yes <input type="checkbox"/> No			Do you know how to vaccinate/give fluids? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you interested in treating expenses for food and supplies as a donation (if not it is perfectly fine)?				
If you have pets, are they on flea prevention? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are they current with all vaccinations? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If you have cats currently, have they been tested (negative) for FIV / FeLV? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Pet Information				
Name of Pet; Type of Pet	Years You've Had Pet	Spayed/Neutered	Inside/Outside	Comments
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Inside <input type="checkbox"/> Outside	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Inside <input type="checkbox"/> Outside	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Inside <input type="checkbox"/> Outside	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Inside <input type="checkbox"/> Outside	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Inside <input type="checkbox"/> Outside	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Inside <input type="checkbox"/> Outside	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Inside <input type="checkbox"/> Outside	
Current or past vet name of clinic:			Phone:	
Are you fostering any other dog(s) or other animals at present? <input type="checkbox"/> Yes <input type="checkbox"/> No			Please explain:	
Emergency Contacts				
# 1 Name:			Relationship:	
Phone:			Other phone:	
# 2 Name:			Relationship:	
Phone:			Other phone:	

Comments:

By signing this document, you agree to the following:

1. The foster volunteer(s) and others in the household who are or may be immune compromised for any reason or allergic should consult with their physician and act on that physician's advice in any decision to foster an animal. Soft Paws Rescue is not and cannot be responsible for any adverse outcomes associated with such situations.
2. Soft Paws Rescue makes no representation regarding the behavior, temperament or health of the animal you are Fostering. Call us if you are concerned or have any problems and we will be happy to give you advice or a referral. Soft Paws Rescue is not liable for any injuries or damages caused by any animal you adopt from us.
3. Animals can often harbor animal and zoonotic diseases that have not yet manifested at the time they are placed into foster homes. Foster homes should take necessary precautions to prevent the spread of any potential diseases to animals or humans. Soft Paws Rescue will provide medical care for any animal in our foster care program but we cannot provide medical care to animals outside our program.
4. Soft Paws Rescue has the right to take any foster animals in your possession back at any given time, including if we feel the animals are not in a good environment, or you are not allowing us to show the animal for adoption to interested parties.

I have read and understood this application and the accompanying notice and have truthfully provided information herein.

Signed _____

Date _____