

Animal Aid and Rescue Foundation PO Box 328 Seahurst, WA 98062

info@myaarf.org

FOSTER APPLICATION

I, made based on personal knowledge and Aid and Rescue Foundation foster care	are made for purposes of my application to for	e that all statements in this application are oster one or more animals through Animal
I would like to foster Animal Aid and R Number of animals I can foster	Rescue Foundation-rescued animals.	
☐ I have a preference for specific anim	nals:	
☐ If any of the animals I specified are Restrictions on the type of animal I can "Only adult cats", etc.)	unavailable, I am open to substitution. foster (For example, "No dogs over 30 lbs",	
Where my foster animals will sleep at n Where my foster animals will stay durin		
Where my foster animals will stay durin	ig the day when I am not nome:	
all the animals in its custody, as well as	ne Foundation is very concerned about the sec its ability to keep track of all animals rescued ion for any reasons not connected to the foster	. I understand Animal Aid and Rescue
My Name	Home Phone	
Address	Cell Phone	
City, State, Zip	Work Phone	
Email* *Email will be the primary method of c regularly, please tell us how to best get	 ommunication from Animal Aid and Rescue Fin touch with you. 	Foundation, so if you do not check email
Drivers License Number	State of Issuance	
Name, address and telephone number o	f my employer (or business, if self-employed)	:
Business Name	Telephone	
Address	Position	
City, State, Zip	Length of time with this employer	

\square I own my home and am permitted to	o bring an animal or animals i	nto my dwelling.			
☐ I rent my home and am permitted to	o bring an animal or animals i	nto my dwelling.			
Landlord's Name	Telephone				
Address Length of time at this residence:	City, State, Zip				
☐ I have a fenced-in yard. Height of fence What is it m	ade of?				
☐ The fence has a gate					
$\hfill\Box$ The gate has a lock. Description of	the latching and locking mech	nanism:			
I have companion animals at my I have copied this page (one for each at (1) all companion animals currently at (2) all companion animals I have had a Details for One Companion Animal	nimal), and I have provided domy home, followed by		e (including any fostered animals).		
Name Age	Species (dog, cat, etc)	Breed (for dogs only)	Gender		
☐ Currently residing in my home.					
Lived in my home in the last 5 year What happened to him/her?					
Where I got this animal Percentage of time he/she spends outside	 de				
Where he/she sleeps at night					
Where he/she stays during the day whe	n I am home				
Where he/she stays during the day whe	n I am not home				
Vaccinations administered:	When:				
Vaccinations administered:					
Vaccinations administered:	wnen:				
Vaccinations administered:Vaccinations administered:	When:				
Name of specific veterinarian I use	Name of specific	veterinarian I use			
Clinic Name	Clinic Name				
Address	Address	Address			
Telephone	Telephone	Telephone			
I have been a client of this vet for Records are under the name of	I have been a client of t Records are under the n				
I have children in the house. A	ges:				

Print Name							
Signature			Date				
Animal A PO Box 3 Seahurst,	28	scue Foundation (A	AARF)				
• Foster application form can be e-ma	niled to <u>inf</u>	fo@myaarf.org. O	riginal is required and	d must be mailed to:			
• I have read this Application in its entruthful. I make this statement under	•	•		this document are made by me, and are Vashington.			
caregiver and Animal Aid and Rescu	Care Apple Foundati foster and	ication." The Fost ion. I understand things in the contract of	er Care Agreement renat if I am approved to er understand that I wi	"Foster Care Agreement," which is a presents the legal contract between a foster of foster an animal, I must review the Foster ill be asked to agree to the terms of the			
• I understand that it is my responsibility to provide regular updates and photos of my foster(s) whether or not I am contacted by an authorized personnel of Animal Aid and Rescue Foundation to make sure the organization is kept informed.							
• I understand that it is my responsible possible.	• I understand that it is my responsibility to report any unusual medical or behavioral issues that may be of concern as soon possible.						
application is approved.		•		ne for a home inspection before my foster			
Name	is my _	Relationship	Phone	_			
Name	is my_	Relationship	Phone	_			
List of two references – people who l	know me (but are not related	to me):				
Name	is my _	Relationship	_				
Name	is my _	Relationship Relationship	_				
Name	is my _	Relationship	_				
Tune	is my	•					
Name		Relationship					

List of all people living in the house and/or who have regular contact with my animal(s)

Yes

No

I would like to be included on your e-mail distribution list to help various animals in need.