AFC Cat Shelter Foster Care Volunteer Application

This form is to help us help you find the best match for you and the animals in need of foster care.

To foster a pet you:

- Need to show current identification showing present address.
- Must be at least 18 years of age.

Your name		
Address		
City, State, Zip Code		
E-mail address		
Home Phone	Work	Cell
Which pets are you willing to	o foster? (Please check all that apply	7)
Adult cat(s) Mom cat with litt Kittens Kittens who need Special needs cat(Undersocialized/T	bottle feeding s)	
	presently? Dogs Cats	
Do you live in:		
ApartmentHouse	_Mobile HomeOther	
Do you rent or own your hom	ne?	etOther
Do you have a room in your l	home where the animals can be kep	ot isolated from family pets?
YesNo If yes, please	describe the location(s):	
Name(s) of other adult(s) in	the household	
Do you have any children live If yes, please list their names	ing in your home? Yes No and ages:	

Current pets

	Type of animal					Yes No Yes No
If you have	e more pets, please cont	inue on t	he back.			
Are any of	ets have their vaccination Fyour cats declawed? Use share the reasons you	Yes]	No			
Past Pets						
If you ever	lost pets due to accider	nt or illne	ess, please describe w	hat happened:		
Have you	ever had a cat in your ho	ome that	was diagnosed with	Panleukopenia?	2	
Yes No	If yes, when?					
Do you cu	rrently have a cat in you	ır home t	hat is diagnosed wit	h FIV? Yes No	Feline Le	eukemia? Yes No
Name of y	our veterinarian				-	
Is there an	ything else you would li	ike to sha	are with us?			
By signing	; this form, I acknowled	ge that a	ll information on th	s form is true ar	nd correct.	
Signature_			I	Date		