



FOSTER PARENT APPLICATION FORM

Date: _____

Name: _____ D.O.B _____ / _____ / _____

Address: _____

Phone: B/h _____ A/h _____ Mobile: _____

Email: _____

Why would you like to be involved in the foster program? _____

Which animals are you interested in fostering?

- | | | | |
|-------------------------|--------------------------|-------------------------|--------------------------|
| Kitten's | <input type="checkbox"/> | Puppies | <input type="checkbox"/> |
| Cats with kittens | <input type="checkbox"/> | Bitches with puppies | <input type="checkbox"/> |
| Injured cats or kittens | <input type="checkbox"/> | Injured dogs or puppies | <input type="checkbox"/> |
| Sick cats or kittens* | <input type="checkbox"/> | Sick dogs or puppies* | <input type="checkbox"/> |
| Large animal's | <input type="checkbox"/> | Rabbits and guinea pigs | <input type="checkbox"/> |

**Ideally this option should be chosen only if no other like animal is housed on your property.*

What pets do you have at home?

Dogs: Males _____ Females _____ Ages _____ Vaccinated Y/N _____ Desexed Y / N _____

Cats: Males _____ Females _____ Ages _____ Vaccinated Y/N _____ Desexed Y / N _____

Other pets: _____

Waikato SPCA Office Use Only

Check	Date Complete	Staff	Comments
Shelter Buddy			
Council			
Property Inspection			
Landlord Permission			
Foster Manual			
Health & Safety Quiz			

Correspondence – Waikato SPCA Office Use Only

Have you fostered an animal before? Y / N

If yes please describe the animal and the situation _____

Have you owned other animals (not listed above) in the past 5 years? Y / N

What happened to those animals? _____

Do you rent your house/apartment? Y / N

If yes, do you have the landlord's permission to keep animals inside the house? Y / N

Landlord's name _____ Phone number _____

Do you consent to us calling your landlord? _____

Do ALL household members agree to you fostering animals? Y / N

Please list any special facilities for foster animals? (E.g. cage for confinement or separate area in house such as a laundry or spare room) _____

Where will your foster pets be kept when you are at home? _____

Where will your foster pets be when you are NOT at home? _____

How many hours each day are you away from home? _____

Do you have children? Y / N

If yes, what ages are they? _____

Have you ever had an animal in your house with a contagious disease? E.g. Snuffles, feline enteritis, parvovirus, ringworm Y / N

If yes please give details _____

Our vet clinic is open for vaccinations at scheduled times from Monday to Friday. Are you able to transport your foster animals and supplies to and from these appointments? Y / N

Are you able to medicate your fosterlings if necessary? Y / N

How long are you able to foster the animals for? _____

Dog and puppy fostering

Do you have a fenced or secure area where foster dogs or puppies can be confined? Y / N

How many puppies can you comfortably accommodate? _____

Do you have any previous experience in the care of dogs or puppies? Y / N

If yes please give details _____

Would you be willing to allow an SPCA representative make a home visit at a mutually agreed time? Y / N



FOSTER PARENT AGREEMENT

Waikato SPCA does not accept any liability for any direct or consequential damages arising out of this foster care agreement.

1. The animal(s) shall remain the sole property of Waikato SPCA.
2. The animal(s) shall be returned to Waikato SPCA upon request, or if I am no longer able to adequately care for them.
3. I accept the Society may wish to inspect my property at any time.
4. I agree to not advertise my foster animals anywhere including social media network sites and understand they are not available for adoption until the Waikato SPCA has authorised them to proceed to adoption status.
5. Should the Society be concerned about the treatment or care of the fostered animals they will be removed from my possession.
6. I agree to transport the fostered animals to the shelter when required by the Waikato SPCA including attending veterinary appointments when necessary.
7. I agree to ensure the vehicle used to transport foster animals will have current W.O.F, Registration, be safe and roadworthy at all times and the animals will be safely restrained in the vehicle at all times.
8. I understand that I do not have any right or authority to keep or place foster animal(s) in other homes or with other individuals. All arrangements must have the prior approval of, and be made through the Waikato SPCA.
9. I agree to provide food, water, shelter and TLC to the foster animal(s) and to follow all medical and other instructions.
10. I understand I must make arrangements with the Waikato SPCA before bringing the fostered animals in for treatment or to be returned.
11. I understand that many viruses have an incubation period of 7-14 days, and I understand that my own pets may be at risk of contracting a contagious virus. I accept that risk and the responsibility of treatment of my own pets if necessary, at my own expense. In the unfortunate circumstances that my foster animals contract a virus (such as parvovirus) I understand that I may have a stand down period of up to 12 months before rejoining the foster programme. This applies to cases such as parvovirus (dogs/puppies) and ringworm.
12. Waikato SPCA does not accept responsibility for damages done to property by foster animal(s) and that if my own pet(s) becomes unwell due to contact with the foster animal(s) then I will not expect the Waikato SPCA to treat or to pay for my own pet/s vet bills.
13. I understand that in the event of illness or medical treatment needed for my foster animal(s), Waikato SPCA veterinarians must be used.
14. I understand that in some circumstances Waikato SPCA may decide that euthanasia is necessary, and I agree to abide by this decision.
15. I agree to not leave young children unsupervised with these animals.
16. I agree to return any food, supplies and equipment to Waikato SPCA on completion of fostering.
17. This contract will remain in force while I am fostering animals on behalf of the Waikato SPCA and it may be revoked at any time by either party.
18. I understand all time schedules for the return of foster pets are dependant upon space available in the shelter. I know that making 'room' for fostered animals could defeat the purpose of the entire programme and that sometimes this may cause delays in being able to return the animals to the SPCA.

I, _____ Agree to and will abide by these conditions for Waikato's SPCA Foster Programme.

Applicant Signature: _____

Date: _____

