



Femme Felines Foster Application

First Name

Last Name

Email

Cell Phone Number

Phone Number 2

Date of Birth

Current Address

Address 2

City/State/Zip Code

Personal References *List 3 personal references below (Include name and phone number)

Tell us about yourself

Why do you want to foster a cat?

Have you ever owned or fostered a cat before? Yes / No

If you currently have pets, are they spayed/neutered? Yes / No / N/A

Please provide the name of your most recent / current veterinarian

Please list the pets you currently have that you are personally responsible for

Are your pets up to date on vaccinations? Yes / No

On a regular day, how long will the cat be left alone?

Are you aware that we often have animals that are in need of medical attention who may require extra patience, medication, etc.?

Yes / No

Have you ever fostered before? Yes / No

*If yes, for what organization? What type of animals did you foster?

What type of animals are you interested in fostering? Check all that apply.

- Mama cat with kittens
- Bottle feeder kittens
- Weaned kittens
- Injured kitten/cat
- Sick cat (Upper respiratory infection, skin condition, etc.)
- Under socialized cat
- Adult cat

Where will your foster cat/cat's spend most of their time when you're away from house?

Can you keep the foster cat away from any other pets in home if necessary? Yes / No

What length of time could you give a foster animal to adjust in your home, if needed?

- Less than 1 week
- Less than 2 weeks
- Less than 4 weeks
- Less than 2 months
- Less than 3 months
- 4 months +

If your foster cat is sick, are you comfortable administering oral, and/or topical medications?

Yes / No

If you travel, what arrangements would you provide for your foster cat while you are away?

About your home

Do you rent or own?

- Rent
- Own
- Other

If you rent, does your landlord allow pets? Yes / No

Do you have a yard? Yes / No

Are the members in household in agreement about fostering a cat? Yes / No

List the members of your household. (Name, relation, age)

Does anyone in your household have pet allergies? Yes / No

If so, to what pets and are they manageable?

Do you have screens in your windows? Yes / No

Do you have an area to quarantine the pet from other animals, if necessary? Yes / No

A Few Questions

What length of time can you commit to fostering?

- Under 1 week
- 2-4 weeks
- As long as needed

Do you understand that the cat you will be fostering are legal property of Femme Felines and must be returned?

- Yes
- No

Do you understand the cat may NOT be given away

- Yes
- No

Do you understand you must contact Femme Felines immediately if the cats becomes sick, dies, or gets lost?

- Yes
- No

Do you understand Femme Felines will not cover any vet bills if not approved?

- Yes
- No

I understand Femme Felines provides no guarantee as to the health of foster animal?

- Yes
- No

I will take all precautions to prevent my foster animal from impregnating another animal or becoming impregnated. In the event that happens, I will notify Femme Felines immediately?

Yes

No

I agree to immediately return any foster animal in my care to Femme Felines at the request of its authorized representative at any time and for any reason. If Femme Felines is forced to take legal action to enforce this provision of agreement, I agree to indemnify Femme Felines for all court costs and attorneys fee connected with such an action

I agree

I understand that if I am in need of supplies for my foster animal, I will contact Femme Felines. I also understand that Femme Felines will not be responsible for refunding money spent on supplies at fosters expense

I agree

I understand that I am not allowed to take the foster animal to a vet if it is not approved by Femme Felines

I agree

I understand that I am not allowed to administer any type of medication (prescribed meds, otc meds, medicated shampoos, etc,) to my foster animal if it is not approved by Femme Felines

I understand

Signature _____ Date _____

*Please attach a photo copy of your valid ID