

Foster Application

Are you applying to foster Cat or Kittens
 Dog or Puppies

Name _____

E-Mail _____

Phone # _____

Address _____

City _____ State _____ Zip _____

Your Date of Birth _____

Your Emergency Contact _____
name phone number

List any animal related organizations you belong to, past pet ownership experience, or any training you may have in animal rescue, pet grooming, dog obedience training, etc.

Please provide names and phone numbers for two personal references:

Do you own or rent Own
 Rent →

Does your landlord allow pets? Yes No

Does your landlord require a pet deposit? Yes No

Please list the name and phone number of landlord:

Do you have a fenced yard Yes
 No

How many pets do you currently have _____

Are your pets current on vaccinations, including bordetella for dogs Yes
 No

Do you have a way to isolate the foster pet from your current pet(s) if needed? Yes
 No

Are you able to bring your foster pet to an adoption event twice a month? Yes
 No

How many children are in your household and what are their ages?

Foster Application Release Form

I understand that Parker Paws will provide all vet care for foster pets, but cannot help if my personal pet should become sick or injured. I further understand that Parker Paws is not liable to me for any injuries, damages, liabilities, losses, judgments, costs or expenses whatsoever that I may sustain as part of my foster responsibilities for Parker Paws. As a pet foster I will be responsible for providing food, shelter, training, and love to ready the pet for adoption.

I agree to immediately return any foster pet in my care to Parker Paws at the request of the authorized Parker Paws Representative, or his/her designate, at any time for any reason. If I give away, sell, or otherwise transfer the pet without following the Parker Paws adoption protocol, I will reimburse Parker Paws for the adoption fee.

I, _____, hereby agree that I am providing volunteer services to Parker Paws. This may include assisting in adoptions of pets through Parker Paws at local PetSmart stores. I understand that neither Parker Paws nor PetSmart is responsible for any illness or injury caused by any animals that I come into contact with during my volunteer work. I agree to hold harmless any release from liability Parker Paws and PetSmart should I become sick or injured from any animals as a result of my volunteer work. I further understand that Parker Paws is not liable to me for any injuries, damages, liabilities, losses, judgments, costs, or expenses whatsoever, which I might suffer or sustain in connection with the performance of my volunteer activities for Parker Paws.

I authorize any duly accredited representative of Parker Paws bearing this release to obtain any information from criminal justice agencies relating to my activities.

Print Name _____

Signature _____

Date _____

Applications must be submitted to Parker Paws with a \$5.⁰⁰ application fee for a criminal background check. You may drop application off at one of our events or mail it to us, with a check payable to Parker Paws, PO Box 781, Weatherford TX 76086.

Home Visit Date _____

Approved by Parker Paws Representative _____

Date _____