

EAST COAST CANINE ALLIANCE Foster Application/Contract



Thank you for your interest in becoming a foster parent. As such, you will be providing a temporary home for puppies and/or dogs in need! The devotion and care given during this time allows the animal a second chance to be adopted by a loving family. Fostering animals is one of the most crucial elements to rescue and can be extremely rewarding. Thank you for your application!

Name: _____

Date: _____

Name (Co-applicant): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Numbers:

home _____

Mobile _____

Do send/receive texts? _____

**Email Address: _____

Items 1-3 below do not need to be filled out unless a home visit is done by others not within our rescue.

THESE questions pertain to OUT of VA fosters

1) DRIVERS LICENSE #s of adults in household:

2) Last 4 digits of adults in household social security numbers:

3) License plate # of car and name on registration:

Make: _____

Year: _____

Model: _____

Color: _____

Place of Employment (Self): _____

Title/Department: _____

How long have you been there? _____

Do you plan on changing jobs? YES NO

Business Phone: _____

Best time to reach you? _____

Place of Employment (Co-applicant): _____

Title/Department: _____

How long have you been there? _____

Do you plan on changing jobs? YES NO

Business Phone: _____

Best time to reach you? _____

Family dynamics: (#children and ages)
(if daycare operated also list)

Name and number of Nearest Relative not living with you: _____

List all the people who live in your home and their ages:

Have you or anyone in your home ever been convicted of any form of animal abuse/neglect?

QUESTIONNAIRE

How long have you lived at your current address? _____

Do you plan to move within the next year? YES NO

If so what will you do with your animal? _____

Why do you want a foster pet? _____



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Is shedding a concern? YES NO Is noise a concern? YES NO

Indicate the energy level you are looking for in a foster pet:
 High Energy Medium Energy Couch Potato Doesn't matter

What other pets do you have? (Type) _____

Where do they sleep? _____

Are your pets currently sterilized? (ie Spayed or Neutered) YES NO

If no, please explain _____

Do you plan on having them sterilized? YES NO

If no, please explain _____

What is your current pets energy level? (ie high, low, medium, etc..) _____

If your other pet is a dog, is it currently on heartworm preventative? YES NO

Do you have a fenced-in yard? YES NO Fence Height _____ Type of fencing _____

Are you willing to reinforce/repair fence if needed? YES NO

If yard is not fenced, is there a fenced-in area nearby where you can regularly exercise your dog? YES NO

Describe that area and its size: _____

Are you willing to have a home visit before fostering? YES NO

Do you travel much? YES NO

** If you do need to travel and cannot take your dog with you, where/with whom would you leave your dog?

Under what circumstance will you have to give up your pet?

Moving New Baby Divorce Pet becomes ill Pet behavior Scratching Other _____ None

If you checked behavior or other, please explain: _____

Have you ever rehomed one of your pets in the past? YES NO

If yes, please explain: _____

How do you train your pet? _____

Who is responsible for training your pet? _____

How do you correct inappropriate behavior? _____

Are you willing to spend time training a foster dog to deal with problems such as housetraining, jumping up, barking,

pulling on the leash and/or separation anxiety? YES NO

If the foster counselor believes it is necessary, are you willing to use a dog crate? YES NO

If no please explain why not: _____

Do you understand that your foster pet will need periodic grooming to include: brushing coat, trimming nails, ear cleaning, and teeth cleaning? YES NO

Approximately how many hours will your foster pet be home alone? _____

Do you live in a: House Townhouse Condominium Apartment Mobile Home

If you rent or lease, do you have permission from your landlord to have a pet? YES NO

Landlord's Name: _____ Landlord's Phone Number: _____

Where do you keep your pet(s) during the day when you are home? _____

When not at home? _____ At night? _____

Adoption agent will be contacting the veterinarian(s) indicated on this application, is this okay? YES NO

Please list the pets that you currently own:

<i>Name</i>	<i>Age</i>	<i>Sex</i>	<i>Type and Breed</i>	<i>Years in home</i>	<i>Reason for Leaving</i>
1					
.					
2					
.					
3					
.					
4					
.					



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Use this area for any special concerns or special needs you may have:
ALSO PLEASE LIST ANY DATES OF ANY PREPLANNED TRIPS/VACATIONS (we do not usually have backup fosters so we need to plan ahead)

Required information:

Is there someone home during the day (Note: not a requirement) YES NO

Do you have access to a car for transportation of the foster animal? YES NO

Please indicate which animal(s) you would be most interested in fostering:

- Mildly sick or injured animals; needs recuperation time in a less stressful environment
- Nursing mother dog and puppies
- Orphaned puppies

Please indicate the amount of time you can commit to fostering animal(s).

- 2 weeks
- 4 weeks
- 6 weeks
- More than 6 weeks
- Would like to do so on a regular basis, especially as needed during the busy season

Would you be interested in fostering an animal on a long term basis? YES NO Probably

PLEASE NOTE: IF YOU ARE UNABLE TO CONTINUE TO CARE FOR A FOSTER PET YOU **MUST** GIVE US A **TWENTY FOUR (24) HOUR NOTICE.** YOU MUST ALSO AGREE TO GIVING US TWO (2) TO THREE (3) DAYS TO FIND THE FOSTER PET A NEW FOSTER! Please GIVE AS MUCH NOTICE AS POSSIBLE!!!!

Have you fostered before? YES NO

Describe your previous volunteer experience: _____

Why do you want to be involved in the foster program: _____

REFERENCES: All applicants, please complete the following section:

Veterinarian's Name: _____ Phone: _____

Veterinarian's Address: _____

Please list two references that you have known for more than two years and can speak to your ability and commitment to providing to a long-term, loving home for your pet(s). You must provide a veterinarian (out of state veterinarian information will be accepted.)



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Name: _____
Address: _____

City: _____ State: _____ Zip: _____
Phone (Day): _____
Phone (Evening): _____

Name: _____
Address: _____

City: _____ State: _____ Zip: _____
Phone (Day): _____
Phone (Evening): _____

RESCUE VETERINARIAN INFORMATION

Our primary veterinarian is:

Dr. Ayre
Owl Creek Veterinary Hospital
587 S. Birdneck Rd.
Virginia Beach, Va 23451
(757) 428-4344

For after hour emergencies:

Blue Pearl
364 S. Independence Blvd.
Virginia Beach, Va 23452
(757) 499-5463

OR

Beach Veterinary Emergency Center
1124 Lynnhaven Parkway
Virginia Beach, VA 23452
(757) 468-4900

In case of emergency always contact:
Gina Senato – (757) 509-3565
Or EMAIL and type URGENT in subject title
ECCArescue@yahoo.com
If cannot reach Gina & it is during Vet office hours, please
call Owl Creek Veterinary Hospital (757) 428-4344

ONLY our approved veterinarians can be used to provide care to our foster dogs. NO ACCEPTIONS. Please note: This rescue will be responsible financially for **any** medical/veterinary care required. Please never hesitate taking dog to ER.... If you are not near one of our approved facilities and it's a matter of life or death for the dog PLEASE RUSH DOG TO NEAREST FACILITY!

Our Policy

If at anytime a rescue representative feels as though the dog is in danger or not being vetted or taken care of properly it is completely understood and agreed upon that any acting rescue representative has the authority to remove the dog from my possession..

I AGREE THAT: this dog will not be used as a fighting or bait dog, this dog is not going to be used as a hunting or work dog, this dog is not being fostered to be bred or to resell dog, this dog will not be an OUTSIDE dog, proper heat and ventilation and air conditioning will be provided for dog, this dog will NOT be chained outside or left in an outside kennel, if dog is left outside for any length of time then adequate shelter, food and water will always be provided! I agree dog can be removed from my possession with no prior notice if deemed by a rescue representative that I am in breach of contract.

PLEASE NOTE: IF YOU ARE UNABLE TO CONTINUE TO CARE FOR A FOSTER PET YOU **MUST** GIVE US A **TWENTY FOUR (24) HOUR NOTICE.** YOU MUST ALSO AGREE TO GIVING US TWO (2) TO THREE (3) DAYS TO FIND THE FOSTER PET A NEW FOSTER! This foster pet is legally owned by Gina Senato, this pet can not be sold, given away, or turned into a shelter at any time!



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Now, therefore, for good and valuable consideration, the parties to the agreement agree as follows:

- Foster agrees to indemnify and hold harmless ANY rescue representative or/and the rescue from ANY direct or consequential damages (to include any damages or injuries to property, other animals or persons) arising from a foster animal or this Foster Care Agreement. This includes any and all manner of actions and causes of actions, suits, debts, dues, accounts, bonds, covenants, agreements, judgments, claims, and demands whatsoever arising from or relating to the adoption, placement, and /or possession of the dog.

- I understand that submitting an application does not guarantee that I will receive approval to foster a pet from foster agent.
- I certify that all information on the Foster Application is true and correct.
- I understand and agree to all of the above statements, rules, and regulations. I also agree that emailed, scanned, faxed, or texted statements, admissions, computerized signatures or any disclosures of any kind from my email or email used to transmit to the rescue representative will be accepted as legal commitment and agreement that I will be held legally responsible for this contract. An original signature is not required to hold me legally responsible to this agreement.

Applicant Signature: _____

Co-applicant Signature: _____

Date: _____

