



ANIMAL RESOURCE CENTER

Animal Resource Center Foster Volunteer Application

Return to: Outreach Coordinator
6790 Webster St., Dayton, OH 45414

The information provided in completing this profile will enable us to find the most satisfying foster animal(s) and experiences for you. Please be sure to complete the profile in its entirety.

Name: _____

Address: _____

Street/P.O.

Apt/Unit #

City, State Zip code

Mailing Address (if different): _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Which do you prefer us to use: Home Work Cell

Email address: _____

Do you live in a(n): House Apartment Condo Mobile Home

Do you: Own Rent

If you rent, please provide your landlord's information:

Name: _____ Phone: _____

How many adults are in your household? _____

How many children? _____ Children's Ages: _____

What types and how many pets currently live in your household? _____

If you have dogs, are they licensed for the current year? Yes No

Who is your veterinarian? _____

Are all of your pets vaccinated? Yes No Are your pets spayed/neutered? Yes No

If your pets are not spayed/neutered, why not? _____

Please check the type of dogs you are interested in fostering (check all that apply):

Sick/III/Injured Behavior Challenges Puppies: Litters Bottle baby puppies

Any dogs in need

Where, specifically, will the foster animal be kept:

During the day? _____ During the night? _____

Do you have a fenced yard? Yes No If yes, how high is your fence? _____

Do you have outdoor shelter available? Yes No

Please describe your outdoor area: _____

6790 Webster Street
Dayton, OH 45414

Ph: 937-898-4457
Fax: 937-454-8139

Website: www.mcanimals.org
email: ARCFoster@mcohoio.org

OVER



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Do you have an indoor area to confine the animal? Please describe this area: _____

Please read these questions carefully and consider your answer:

How would you feel with a decision that the animal you are fostering, or had fostered, had to be euthanized?

Upon adoption of any animal, the animal will be spayed/neutered. Do you have any questions or concerns about this spay/neuter policy? Please comment: _____

Check the box next to any supplies you can provide for the fostered animal while it is under your care:

Crate/Kennel Bedding Toys Dry Food Canned Food Baby Gates

Puppy Food (for puppies) Milk Replacer (for very young puppies)

Is there anything you would like us to know about you and your family or resident pets?

Things you will need to Understand:

- All animals need to be returned to the Animal Resource Center at the end of the foster period.
- Animals brought into your home may have contagious diseases that can infect your own animals, if exposed.
- We need frequent updates from you, by phone or email, throughout the foster period.
- Foster animals often have behavioral issues that need to be corrected and may, for a time, be destructive.
- Some animals may require medications or frequent visits to our veterinarian
- Some foster candidates may need a foster home for up to several months

I confirm that all information provided on this profile is true and correct. I also understand that foster training will be provided for me before I am able to begin fostering animals for the Animal Resource Center. I understand that the Montgomery County Animal Resource Center is not responsible for any property or personal damage, wounds inflicted or illnesses caused by the foster animal(s).

Name (please print legibly): _____

Signature: _____ Date: _____

Thank you for joining the Foster Care Program!

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