

MAS Rescue, Inc

DOG FOSTER QUESTIONNAIRE

Date: _____

Thank you so much for considering fostering. Fostering saves lives. The more homes, the more animals we can save from shelters.

Please be honest with all your answers. MAS Rescue, Inc.: 'Maryland Animal Society & Rescue Inc.', understands that everyone is different and that there are certain circumstances that you cannot help. We will always do what we think is best for the animal(s). Please remember to complete the application, blanks will delay the process.

How/Where did you hear about MAS Rescue? _____

Date you are ready/willing to foster _____

Do you have a particular preference as to breed, age, or gender-?

INFORMATION:

Name: _____ DOB _____

Address: _____

City/State Zip: _____

Phone: _____ Cell: _____ Work phone: _____

Email: _____

What are your work hours and work days each week? Employer:

Number of children and their ages(DOB of children over18):

Other primary adult household member(please list all):

Name: _____ DOB: _____

Relationship to applicant: _____

Age: Cell phone: Employer: Work days/hours: Please list all household members over the age of 18 by name:

What type of dog are you interested in fostering? (check all that apply)

___ Puppy(ies)

___ Adult dog/dogs that is:

___ is shy or nervous ___ has health problems ___ has separation anxiety

___ Puppies with a mother

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___ needs to lose weight ___ needs help housebreaking ___ has issues w/strangers

___ is a senior ___ other: _____ Are there are any particular animals/issues you want to avoid?

What type of puppy/dog would do best in your home?

Living arrangements (house, apt., i.e.): _____ Do you own OR rent?

_____ If you rent please include name of Landlord/Complex and phone number:

Do you have a yard? ___ Do you have a fence? ___ Play area/park near by? ___

Are you certain your fence and gate are fully secure? (Puppies can fit under and through fences.) Please explain how you plan to exercise the animal.

-If there is no fence, how will the dog be let out: (circle all that apply) Leash walked Kenneled Tie out
Electric fence Trained to stay in boundaries Other: _____

-Where will this animal be kept during the day: Inside/Outside -During the night: Inside/Outside

-When no one is home, where will you keep the animal? (circle all that apply) Crate Free Roam Backyard
Kennel/doghouse Garage Access doggie door Other: _____

-Where will the animal sleep?

-Are you able to transport the animal? (For example, to the vet, if necessary or to an MAS foster home for a placement appointment? Yes/No (circle one)

Please provide a detailed description of a typical day with your new furry foster friend. (Include number of hours the animal will be left alone, if you will use a crate, have someone visit, dog walker, daycare, come home for lunch, etc.).

Please list all animals that are currently in your home: _____

Name Kind of animal M/F Age

_____ -

Current Vet's Name:

Vet's phone:

Under whose name are the vet records listed?

Altered? Vaccines current?

Please list all of the animals you have had in the past 15 years

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For all animals below, please indicate how long you had them/where they are now and if they are deceased, what year did they pass and how?

Name Kind of animal M/F Age Altered?

Vaccinated Declawed? Yearly?

Past Vet's Name:

Vet's phone:

In whose name are the vet records listed?

Veterinary/Medical Release – I authorize the release of my animals' medical information and records from the veterinarian or animal hospital(s) listed above.

Signature Date

Are you financially able to provide food while the animal is in your care? Explain why I should feel comfortable with letting you foster for MAS Rescue.

What will you do with the animal, if you go away for vacation, family visits, etc.?

Are you fostering for another rescue at this time? If yes, please provide contact for the rescue. (Please note our policy requiring fosters to let us know at any time they begin fostering and/or add a new animal to their home.

Describe how you would handle the following situations: Animal urinates on floor:

Animal chews your shoes:

Animal climbs/sleeps on your couch: Animal eats something poisonous: Animal gets loose:

Neighbor complains:

Remember: Most of the animals that we have for adoption have been rescued from difficult situations, sometimes found in horrible circumstances. How do you feel about this?

Often requiring several days (10-14days) to acclimate themselves to new surroundings and routine, can you allow an animal time to fit in to your lifestyle?

***Please be aware, if we ever believe your fostered animal is not receiving the required care, vaccinations, parasite preventatives, or is not altered in the requested period of time, we do reserve the right to ask that the animal be returned. INITIAL HERE_____

***The animal in your care remains an MAS animal, you are providing foster care.

INITIAL HERE_____

Nearest living relative (not living w/you): Address/City/State/Zip:

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MAS Rescue, Inc. P.O. Box 5143, Baltimore, MD 21224 / 410-227-3566

www.MASRescue.org -- adoption@MASRescue.org

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Phone:

Name of a personal reference (not relative): Phone # for your reference:

Email address for reference:

Known for how many years: Please list additional Questions or Comments Here:

Please initial below that you have visited our website, read all of our policies and procedures.

INITIALS: _____

Please initial below that you will update MAS Rescue within 48 hours of any addition to animals in your home, permanent or temporary. INITIALS: _____

Please initial below that you are willing to allow a home visit from MAS Rescue once you are given 48 hours notice. INITIALS: _____

Occasionally fosters request MAS assistance in rescuing an animal, should you want to make that request, you will need to ask for the form to complete for the rescue to be considered by the Board. A request is not a guarantee. INITIALS _____

Please be sure you have signed our Waiver.

Please sign below that all of your answers are true and accurate to the best of your knowledge.

Signature Date

THANK YOU FROM THE BOTTOM OF OUR HEARTS!

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