

## **Foster Home Volunteer Form**

I am interested in volunteering/fostering dog(s) for Caring for Canines.

Name:	Email Address						
Address:							
Phones: Day:		I	Evening:			_	
Cell:							
Current Veterinarian	arrent Veterinarian :(name) (phone):						
Length of time willing	g to foster: (	(circle one)					
2 weeks (minimum) 3 - 6		6 weeks	weeks 6 - 12 weeks		As long as needed		
Type of Dog: (circle	all that apply	y)					
Mom & Litter	Puppy	Young Ac	dult Dog	Adult I	Oog	Senior Dog	
Disabled or Special N	leeds Dog	Do	og Recovering	from Surgery	y/Injury		
Small (under 20 lbs.)	Me	dium (between	n 20-50 lbs)	Large (	over 50 lbs.)		
For the questions below	ow, circle all	l answers that	apply and/or s	upply written	ı details.		
1. If requested to brir	No,	If No, please	explain why _				
2. What type of home							
☐ APARTMENT	□со	NDO/TOWN	HOME	□SINGL	E FAMILY F	HOME	
OTHER (describe):_							
3. How long have yo	u lived at yo	ur present add	ress? I	Months	Years		
4. Do you OWN or R	ENT your h	ome?					
5. Do you have a fend Please describe your	•						
6. Is your yard compl	etely enclos	ed? YES NO	)				
7. Do you have a poo	1?	YE	SNO	)			

8.						
Is the pool enclosed or fenced?YESNO						
9. Does your family unit include children?YESN) If yes, age of children:						
10. Are there any other residents in the house?YESNO  If Yes, Please explain						
11. Do you currently have other pets/animal companions? YES NO If yes, give species, age and breed.						
12. Are your other pets Spayed/Neutered?YESNOSOME ARE If some are not spayed/neutered, please explain reason						
For the questions below, circle all answers that apply and/or supply written details.						
13. Do you prefer a specific gender of dog?YESNO Female Male Doesn't Matter						
<ul> <li>15. I would like to foster a dog that is: (circle most appropriate temperament for your home)</li> <li>Quiet Playful with people Playful with dogs Moderately playful Active Very active</li> <li>16. I will provide the following outdoor exercise opportunities for a foster dog:</li> </ul>						
17. I consider my animal experience to be: Experienced Somewhat experienced Novice						
18. Where will the dog(s) be housed during the day when you are home?  LOOSE INDOORS CRATED FENCED YARD or OUTSIDE RUN (with shade & water)  OTHER (describe)						
19. Where will the dog(s) stay while you are gone during the day?  LOOSE INDOORS CRATED FENCED YARD/OUTSIDE RUN (with shade & water)  OTHER (describe)						
20 Where will the dog(s) sleep at night?						
LOOSE INDOORS CRATE FENCED YARD OUTSIDE RUN OTHER (describe)						
21. Approximately how many hours are you gone each day?1-23-56-89-12						
22. Would you be open to having a C4C representative visit your home by appointment? YESNO						

23. How did you hear about C4C?					
QUESTIONS, COMMENTS OR CONCERNS YOU MAY HAVE FOR C4C?					
Name	Date				
Address (Street No, City, State, Zip Code)					
Email address	Phone No.				