CAT FOSTER APPLICATION FORM, SAFE HAVEN ANIMAL RESCUE

Name:

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E-mail:

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Phone:

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Address:

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Please tell us about the people who live in your home (# of adults, # of children and their ages). What other animals live in the home with you?

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What is your home like?

\_\_\_busy/noisy

\_\_\_moderate comings/goings

\_\_\_quiet with occasional guests

Please tell us about your experience with cats/kittens, as well as any fostering experience you have:

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Please describe the physical setup you have for fostering (i.e. separate space for the foster cat/kitten)

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Are you willing to foster a cat of any age?

\_\_\_\_ Yes

\_\_\_\_ No; preferred age(s) or type of cat \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you willing to foster a cat with special needs?

\_\_\_\_ Yes

\_\_\_\_ No

Are you willing to take your foster cat(s) to vet appointments at a convenient time for you?

\_\_\_\_Yes

\_\_\_\_ No

Are you willing and able to administer medication to your foster cat, if needed?

\_\_\_\_ Yes

\_\_\_\_ No

Do you understand that foster cats should be indoor only?

\_\_\_\_ Yes

\_\_\_\_ No

Do all your family members agree to foster a cat?

\_\_\_\_ Yes

\_\_\_\_ No