



Green Acres Animal Rescue

~ FOSTER APPLICATION ~

Full Name: _____ DOB: _____

Address: _____

Phone: (C) _____ (H) _____ (W) _____

EMAIL: _____

Driver's License/ID (STATE, #, EXP DATE): _____

List the Full Name and Age of each individual (adults and children) in your household _____

What type of home do you live in? (Rent / Own) (Single Family / Townhouse / Apartment / Other)

Describe your yard: (No Yard / Unfenced / Partially fenced / Completely fenced / Other _____)

If you rent, are you allowed to have pets? (Yes / No) Are there any restrictions on the number/breed/size/etc. of animals? (Yes / No) If yes, explain _____

Landlord's name and phone number _____

Do you have homeowners/renters insurance? (Yes / No) If yes, company? _____

What are the pet ordinances of the city/county in which you live? _____

How long have you lived at your current residence? _____

Previous address: _____

Do you have future moving plans? _____

Do you (or anyone at your residence) have any allergies that could impact having an animal in your home? (Yes / No) If yes, please explain _____

Do you presently own pets? (Yes / No) If yes, describe _____

Are your pets spayed/neutered? (Yes / No) If no, why not? _____

Are your pets up to date on vaccinations? (Yes / No) If no, why not? _____

GAAR requires all animals currently residing in your household to be up to date on vaccinations. You may be asked to provide proof of vaccination records.

List any medical issues of your current pets _____

Name/Phone Number of your Veterinarian _____

Foster Name _____



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Have you (or anyone at your residence) recently applied to foster or adopt any other animal(s)? (Yes / No)

If yes, please explain _____

Have you been convicted of any felonies in the past five (5) years? (Yes / No) If yes, please explain _____

**By submitting this application, you agree to a basic criminal history check.*

Why are you interested in fostering? _____

Describe the animal(s) are you available to foster? (circle all that apply)

Dog(s): Adult (1yr+), Adolescent (6-12 months), Young (under 6 months), Pregnant/Nursing Female, Bully breeds

Cat(s): Adult (1yr+), Adolescent (6-12 months), Young (under 6 months), Pregnant/Nursing Female

Other (please specify): _____

Explain your experience with handling and/or fostering animals? _____

Will you be able to separate foster animals from your own? (Yes / No / I do not have any of my own animals)

How many hours during each work day will the foster animal be without direct care? _____

Where will the animal stay while you are away from home? _____

Where will the animal sleep? _____

What is the maximum time you are able to foster? _____

Provide the Name/Phone Number/Relationship of two references (at least one of which being non-family)

(1) _____

(2) _____

****EACH ADULT (18+) AT YOUR RESIDENCE MUST AGREE (AND INITIAL) THE STATEMENTS BELOW.****

_____ GAAR will maintain ownership of all animals placed in foster care and will continue to make all decisions regarding the adoption and placement of all fostered animals. GAAR will provide food, litter, crates, bedding, toys, and other items as needed for the foster animal while in your care. All foster animals must be returned to GAAR upon request.

_____ I agree to allow a GAAR representative to conduct home visits.

Foster Name _____



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_____ The foster parent is responsible for providing safe, secure, temporary care to foster animals in a home environment prior to their adoption. The foster parent will transport the foster animal to/from appointments and events. Fostering is strictly on a volunteer basis, therefore no compensation or insurance against bodily harm will be provided for me.

_____ I understand that animals are as individual as people. I agree to spend the necessary time and effort to help the pet adjust to a home environment, reinforce appropriate behaviors, work with problem areas, feed appropriately, properly exercise and socialize, and house the animal indoors only.

_____ GAAR makes no guarantee of the animals health, behavior, or actions. Ideally, I will care for the animal until it finds its forever home, but if it doesn't work out, I must contact GAAR and allow reasonable time (up to two weeks) to find another foster home for the animal. I further understand that the behavior of domestic animals is sometimes unpredictable and that some domestic animals are capable of inflicting serious personal injury or death, as well as extensive property damage. Knowing the risks of handling domestic animals, nevertheless, I hereby agree to assume those risks and to release, indemnify and hold harmless GAAR and its members/volunteers who might otherwise be liable to me or my heirs or assigns for damages.

_____ It is the foster parent's responsibility to bring the foster animal to one of GAAR's approved vet clinics. When a foster animal is due for vetting (including medication administration), GAAR will coordinate vetting needs with the foster. It is the foster's responsibility to bring the animal to one of GAAR's APPROVED vet clinics. If my foster pet is in need of medical attention, I MUST obtain prior approval from GAAR. I understand that I am 100% financially responsible for any preventable medical expenses while the foster pet is in my care. GAAR will not reimburse you for ANY unapproved expenses.

_____ I understand that fostering is at my own risk and I hereby forever release, discharge and agree to hold harmless and indemnify GAAR from all claims, demands, actions, causes of action or liability of any kind whatsoever arising because of doing volunteer work with GAAR. I agree that I will not make any claim against, sue, attack the property of, or prosecute GAAR (or any of its board members/volunteers) for any death, personal injury or property damage, whatever the cause or place of event giving rise to the claim, which I may suffer or sustain as a result of or in connection with my participation as a volunteer.

I have read and understand, in its entirety, this application and certify the information entered is true and correct. I am aware that this is an indemnity, waiver & release of liability, and contract between me and GAAR. I am signing this on my own free will, and in signing, I fully agree to the conditions of this agreement.

Applicant Signature: _____

Printed Name: _____ Date: _____

Green Acres Animal Rescue Contact Information: (Website) www.greenacresanimalrescue.org

(Email) inquiries@greenacresanimalrescue.org (Text) 320-406-9602 (Facebook) greenacresanimalresc

Foster Name _____



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(Below is for Approved GAAR Representative Use Only)

Review the foster application. Answer the questions below to assist in determining if the applicant meets the qualifications to become a foster with GAAR.

*Do all adults in the home agree to the foster agreements as listed in the application? (Yes / No / NA) If No, why? _____

*Was an ID presented? (Valid/Expired) (Driver's Licence/Military ID/Passport/State Identification Card) If No, why? _____

*Has the applicant passed a basic criminal history check? (Yes / No / NA) If No, why? _____

*Is the applicant in compliance with any/all rental policies as they apply to animals (Yes / No / NA) If No, why? _____

*Is the applicant in compliance with any/all residential ordinances as they apply to animals? (Yes / No) If No, why? _____

*Do the applicant's references agree with the request to foster? (Yes / No / NA) If No, why? _____

*Does the applicant meet all required considerations? (Yes / No) If No, why? _____

*Are there limitations based on required considerations? (Yes / No) If Yes, explain _____

Is the Foster Application Approved? (Yes / No) If No, why? _____

Approved GAAR Representative Signature: _____

Printed Name/Title: _____ Date: _____