



FOSTER APPLICATION

Siberian Cat Rescue Group 501 (c) (3)
 President, Pamela Martin
 North Texas
 972-636-2453

Personal Information																																												
First Name:	Last Name:																																											
Address:																																												
City:	State:	Zip Code:																																										
Home Phone: <i>(Include area code)</i> () -	Work Phone: <i>(Include area code)</i> () -																																											
Home E-mail:	Work E-mail:																																											
Nearest Large City with an airport: Distance:	Cell phone: <i>(Include area code)</i> () -	Fax: <i>(Include area code)</i> () -																																										
<p>Please note yes or no in response to the following questions:</p> <p><i>Wish to Foster?</i></p> <p><i>Wish to Foster with option to adopt?</i></p>																																												
Vet Information:																																												
<p>Please have your veterinarian fill out and sign the Vet Reference Form. This form may be faxed or mailed. We will not process an application without this form. Please let you vet know we may call and that they are free to speak about your animals and their veterinary history.</p> <p>If you do not have a veterinarian we request that you locate one and provide a statement to the effect that they will work with you and SCRG.</p>																																												
Family Information:																																												
Children Living in Household <i>(please include number and ages):</i>																																												
<p>All pets owned and presently living in your home: <i>(please list current & previous pets--use additional space if needed)</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Animal</th> <th style="width: 25%;">Type/Name</th> <th style="width: 10%;">Age</th> <th style="width: 15%;">yrs owned</th> <th style="width: 35%;">Where is this pet now?</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>					Animal	Type/Name	Age	yrs owned	Where is this pet now?																																			
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Please attach a page with additional animals owned if there is not enough room on this form.

Are your dogs/cats up to date on vaccines?

Are your dogs/cats spayed/neutered?

If not, why not?

Have you ever had a cat declawed?

Cats at home – Have they been tested for Feline Leukemia & FIV?

Results of FIV/FELV testing & date of last test:

Do you animals ever go outside?

Home Situation (Own/Rent):

How many years at current residence:

Average number of hours a day someone is home:

I live in a House Condo Mobile Home RV Apartment

I Own Rent Live with parents or relatives

Landlords Name: _____

Phone Number: _____

Do you have an isolation area for an incoming cat? YES NO

Do you travel often? YES NO

If so how do you provide for them while you are away?

What will happen to this pet in case of emergency while you are away? _____

How many hours a day will this cat be left alone? _____

Where will the animal be kept when alone? _____

Who primarily is responsible for the cat _____

Where is the pet to be kept during the day?

And at night?

IF the cat were to become injured or ill what would you do?

What would you do if treatment was expensive?

Does anyone in your family have allergies to cats?

What will you do if the new pet does not get along with present cats?

Have you ever turned an animal over to a shelter or rescue group?

If yes please explain:

Under what conditions are your animals outdoors?

Have you ever given up an animal, and if so, why?

Have you or any member of your family had a history of allergies or asthma?

Why do you want to foster?

Do you have any experience with Siberian cats?

Previous experience with Purebreds, please indicate which breeds and what grooming experience you have:

I fully understand that any cat/kitten I may be fostering is the property of SCRG and if asked to relinquish this cat/kitten by a representative of SCRG I will do so in a timely manner and assist in its delivery to its next destination.

_____ YES _____ NO

If fostering with an option to adopt I understand I will have to submit an application to SCRG for approval and if approved the standard \$175.00 adoption fee does apply and completion of adoption contract by SCRG must be completed. Any expenses I have incurred may be deducted for the adoption fee.

_____ YES _____ NO

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Two References (Not Related):

Name:	E-mail:	Phone: () -
Name:	E-mail:	Phone: () -
How did you hear about us?		
<p>Note: Please provide complete, accurate information. Email addresses for references may expedite processing of your application. Please inform your references that they will be contacted. Applications are processed as expeditiously as possible on a first in, first processed basis. We do accept emailed applications but they must be followed up by receipt of a signed, initialed version in the USPS mail.</p>		

Please let your veterinarian know that we may call and that they have your permission to speak freely with us. We may ask your veterinarian about your animals and their veterinary history. If you do not have a veterinarian we request that you locate one and provide a statement to that effect as well as a vet reference from a previously used veterinarian, if possible.

If you rent, please let your landlord or management company know we will call as we will want confirmation that your landlord or management company agrees to your fostering cats on their property.

Please also note your agreement with and awareness of our policies and your responsibilities by checking the boxes below prior to submitting your application:

By checking this box, I agree to abide by all local animal ordinances, leases, and property ownership agreements as they pertain to the legally defined number of pets allowed in any human domicile or associated/attached properties. I further agree that, should I be in violation of any local animal ordinances, leases, and property ownership agreements pertaining to the number of animals allowed, I hold harmless Siberian Cat Rescue Group matters, and assume all legal and/or financial liabilities pertaining to any violations of said ordinances, leases, and/or agreements.

I will tell my veterinarian that Siberian Cat Rescue Group may be calling for a recommendation and that they have my permission to speak freely. If I rent, I will tell my landlord or management company to expect a call, as well.

Yes, I understand that I will assist SCRG in obtaining a surrendered cat and will assume the responsibility of vetting and making ready the cat to go to its new home.

Yes, I understand that a home visit evaluation may be required prior to my application being approved and/or during the foster.

I have read the Siberian Cat Rescue Group Foster Contract and agree to mail in a signed copy, as requested, should I be accepted as a SCRG Purebred Rescue foster.

Initial your approval here

I certify the above to be true and complete to the best of my knowledge.

Signature: _____

Date: _____

This form will be reviewed, prior to adoption approval of any animal you are waiting to adopt

Please sign and date this form, initial every page, and mail to:

**Pamela Martin
President, Siberian Cat Rescue Group
siberiancats@gmail.com**