



Contact: Nicole Strickland
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Pickens County Animal Shelter

3563 Camp Road
Jasper GA 30143
(706) 253-8983

FOSTER CARE APPLICATION & AGREEMENT

Date: _____

Name: _____

Are you over 21 years old? Yes _____ No _____

Address: _____

City: _____ State: _____ Zip: _____

Home: () _____ Work: () _____

Cell: () _____

E-mail: _____

Do you own or rent the place where you live? _____

If you rent, are animals allowed? _____

If there are restrictions on animals, explain: _____

If you rent or reside in another person's home, provide their name and telephone

number: _____

Number of children in your household: _____ Their ages: _____

Do you have a yard? Yes _____ No _____

If yes, is the yard completely fenced? Yes _____ No _____

Circle the option that describes your normal day:

Home all day _____ Out part-time _____ Gone 7 – 10 hours daily _____

Indicate pets currently living with you:

Dogs _____ Cats _____ Birds _____ Other _____

Name of your veterinarian: _____

Are your pets: Indoor only _____ Outdoor only _____ Both _____

Are your pets current on their vaccinations? Yes _____ No _____

Are all of your pets spayed and/or neutered? Yes _____ No _____

If no, explain: _____

What type of animal(s) would you like to foster?

- | | | |
|---|-----|----|
| <input type="checkbox"/> Young unweaned kittens without a mom | Yes | No |
| <input type="checkbox"/> Young unweaned kittens with a mom | Yes | No |

- | | | |
|---|-----|----|
| <input type="checkbox"/> Weaned kittens | Yes | No |
| <input type="checkbox"/> Adult cats | Yes | No |
| <input type="checkbox"/> Young unweaned puppies without a mom | Yes | No |
| <input type="checkbox"/> Young unweaned puppies with a mom | Yes | No |
| <input type="checkbox"/> Weaned puppies | Yes | No |
| <input type="checkbox"/> Adult dogs | Yes | No |
| <input type="checkbox"/> Sick or injured pets | Yes | No |

How long are you willing to foster at any one time? _____

Are you willing to foster more than one animal at a time? Yes _____ No _____

Any foster pet you take needs to get along with: Dogs _____ Cats _____ Kids _____

How will the foster pet receive exercise? _____

Where will the foster pet be kept? Indicate day with a "D" and night with an "N":

Loose Indoors _____ Basement _____ Garage _____

Closed in a room _____ Fenced Yard _____ Pen _____

Loose Outdoors _____ Tied outside _____ Crate or Carrier _____

Other _____

Have you cared for young, unweaned puppies or kittens before: Yes _____ No _____

If yes, explain: _____

Have you ever given medication to sick animals before? Yes _____ No _____

If yes, explain: _____

Are you willing to provide food and litter at your own cost for foster pets:

Yes _____ No _____

Have you fostered an animal before? Yes _____ No _____

If yes, what organization did you foster for? _____

I, _____ (name of foster applicant), make the above statements and voluntarily enter into this agreement to provide a temporary home as a foster caregiver to any animals PCAS may temporarily place in my care.

- I agree to provide a PCAS representative access to all parts of my home and property for a home inspection before my application to foster is approved.
- I understand that I may be required to provide foster care to my foster animal for an extended and indefinite period of time.
- I agree that I am over 21 years of age.
- I understand that PCAS provides no guarantee as to the health of my foster animal and that my foster animal may have medical needs, socialization problems and may not be housebroken.
- I agree to provide my foster animal with veterinary care as authorized by PCAS. I will not arrange or pay for any elective veterinary care for my foster animal without the express consent of an authorized PCAS representative.
- I will take all necessary precautions to prevent my foster animal from either impregnating another animal or becoming impregnated. In the event that happens, I will notify PCAS immediately.
- I understand that I may only have my foster animal temporarily.
- I understand that I am fostering this animal for PCAS and that I do not have any right of ownership over my foster animal. I further agree that PCAS rights in and to my foster animal are superior to mine. I also agree to provide a PCAS representative access to my home and property to check on my foster animal at any time that I am in possession of my foster animal.
- I agree to immediately return any foster animal in my care to PCAS at the request of its authorized representative at any time and for any reason. If PCAS is forced to undertake legal action to enforce this provision of the agreement, I agree to indemnify PCAS for all court costs and attorneys' fees connected with such an action.
- If I am planning to move at any time during the period when I am housing a foster animal, I agree to contact PCAS prior to my move and provide PCAS with my new contact information. I understand that PCAS has the right to request return of my foster animal based on my change of residence and agree that I will surrender my foster animal to PCAS immediately upon request.
- I understand that as long as I provide foster care to my foster animal to PCAS satisfaction, I will be given the first right of adoption of my foster animal, at such time as PCAS decides to place my foster animal for adoption.
- If at any point I can no longer, or do not want to continue to, provide care and shelter for my foster animal, I agree to contact PCAS and arrange for surrender and return of my foster animal back to PCAS.
- I will not transfer possession or custody of my foster animal to any other person at any time, except for temporary, short-term possession for the purpose of vet care, grooming, etc.
- I agree to contact PCAS with any and all questions or concerns about my foster animal or the Foster Care Program as well as with updated contact information.
- I agree that If I refuse or fail to comply with any provision of the agreement, PCAS has the right to terminate this agreement and also has the right to the immediate surrender and return of my foster animal(s). I further consent to provide PCAS access to my premises if necessary to facilitate the return.
- I agree that the opportunity given to me to help rehabilitate my foster animal, as well as the chance of a potential future adoption, is of significant benefit to me and serves as proper legal consideration in exchange for my agreement to the terms of this contract.

I have read this Application and Agreement in its entirety and I agree that all statements and agreements contained in this document are made by me and are truthful under penalty of perjury under the laws of the State of Georgia.

Signature

Date _____

Print Name

Return Application and Agreement to:

Pickens County Animal Shelter
3563 Camp Road
Jasper, GA 30143

For PCAS use only:

Name of Applicant: _____

Approved: Yes _____ **No** _____ **Staff Initials:** _____

Date: _____

Comments: _____
