The DAWG Project

foster application



Foster's Information

Name:			DOB:
Street Address:			
City, State, Zip:			
Driver's License #:		State:	
Email:			
Phone: (H)	(C) (V)
Person to contact in case of e	emergency	•	
Name:		Phone:	
Living Arrangements Do you: Own Home Own Apartment Rent Home Rent Apartment Other			
If renting, please provide land	flord's nan	ne & phone:	
		ne a phone.	
Do you have a fenced in yard:			
Type of fence:			

Are there any slats/openings that could allow a small dog to get in/out?

Please list all persons living with you: (if none, write n/a)				
Name:	Age:	Relationship:		
Is everyone in your home awa	are that you have	applied to foster?		
□ Yes		applica to rester.		
□ No				
Is everyone agreeable to havi	ing a foster at ho	me?		
□ Yes				
□ No				
If no, please explain:				
, ,				
Animal Care				
Place list all animals living w	with your (if none	write n/a)		
Please list all animals living w	vicii you. (ii none	, write II/a)		

Name:	Age:	Breed:	Date of last vaccinations:

Veterinarian Name and Phone #:
Hours per day that foster(s) will be left alone:
During the week:
□ Less than 4 hours
□ 4-8 hours
□ 8-10 hours
□ More than 10 hours
During the weekend:
□ Less than 4 hours
□ 4-8 hours
□ 8-10 hours
□ More than 10 hours
While left alone, foster(s) will be:
□ Individual crate
□ Shared crate
□ In a restricted area of home
□ Free to roam
□ Other (please explain)
Do you understand that sometimes a complete history and temperament of a rescue dog may not be known?
□ Yes

□ No □ I only want to foster a dog with a	a known history
Are you able to transport foster to vet ☐ Yes ☐ No Do you have any concerns about foster	·
By submitting this application, I affirm true and complete to the best of my knaccepted as a foster, that I am not the medical decisions/rehoming decisions (DAWG). I understand that any false stands misrepresentations made by me on this immediate termination of the foster coreturned. DAWG shall be held harm less claims and damages of every kind, for for damage to or loss of property, arisi or indirectly, the operations or perform volunteer (foster) under this agreement arising in whole or part from the negligible. DAWG of any injuries such as illness, expertaining to my foster as soon as possible.	nowledge. I understand that if I am rightful owner of the dog and any will be made by The DAWG Project tatements, omissions, or other s application may result in an ontract and the foster dog to be from and against any and all injury to any person or persons and ng out of or attributed to, directly nance of the above named at, including claims and damages gence of DAWG. I agree to notify scapes, injuries or any concerns
Signature:	Date: