

Senior Dog Rescue of Oregon  
Philomath, OR  
(541) 929-4100  
www.sdro.petfinder.com faria@pioneer.net

## FOSTER CARE APPLICATION

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Number of adults in home \_\_\_\_\_ Number of children in home & ages \_\_\_\_\_

### PETS IN THE HOME

Number, breed, sex and age of Dogs:

\_\_\_\_\_

Cats \_\_\_\_\_ Other pets \_\_\_\_\_

Are all your pets spayed/neutered  Yes  No Currently vaccinated  Yes  No

Where do your pets live  Inside  Outside  Combination  Other (please explain)

### FOSTERING INFORMATION

Why are you interested in becoming a foster home? \_\_\_\_\_

What types of dogs are you willing to foster (check all that apply)

Females  Males  Adults  Puppies  Abused/Neglected  Special needs (blind, deaf, etc.)

How many dogs are you able to foster at one time \_\_\_\_\_

Are there any restrictions such as weight, temperament, etc. Please explain \_\_\_\_\_

Other information \_\_\_\_\_

As a foster care home, are you willing to provide daily food, water, exercise and routine care that a foster animal will require?  Yes  No

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date