

## **BUMBLEBEAST DOG RESCUE FOSTER/ADOPTION APPLICATON**

ANIMAL ADOPTION/FOSTER APPLICATION \*\*\* PLEASE COMPLETE THIS FORM FOR INTEREST IN TEMPORARY FOSTERING OR PERMANENT ADOPTION. THE QUESTIONS ARE DESIGNED TO HELP FIND THE PERFECT MATCH FOR A FOSTER OR ADOPTER.

CHECK ONE:					
FOSTER ADOPTION ODG CAT					
NAME:OCCUPATION:					
NAME OF CO-FOSTER/ADOPTER:OCCUPATION:					
CHILDREN? CIRCLE ONE: YES OR NO AGES:HOW MANY?					
DOGS? CIRCLE ONE: YES OR NO CATS? YES OR NO OTHER: # OF ANIMALS					
ARE ALL ANIMALS NEUTERED/SPAYED? CIRCLE ONE: YES OR NO					
ADDRESS:CITY:					
PHONE: ALT. PHONE:					
EMERGENCY CONTACT NAME:PHONE:PHONE:					
<b>CIRCLE ONE:</b> DO YOU LIVE IN A HOUSE, APARTMENT, TOWNHOME, OR RANCH PROPERTY?					

CIRCLE ONE:	DO YOU HAVE A	FENCED YARD	FENCED PRC	PERTY? YES OR NO
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IF YES HOW HIGH IS THE FENCE? FEET IF YES IS IT DOG ESCAPE PROOF? CIRCLE ONE: YES OR NO
What type of fence do you have? Chain link?Wooden?Other
CIRCLE ONE: DO YOU HAVE A SWIMMING POOL? YES OR NO DOGGY DOOR? YES OR NO
CIRCLE ONE: DOES IT HAVE SAFETY COVER, OR IS IT FENCED OFF? YES OR NO
CIRCLE ONE: DO YOU HAVE A TERRACE? YES OR NO IF YES HOW MANY STORIES HIGH?FT
WHAT SECURITY MEASURES DO YOU HAVE IN PLACE TO PREVENT FALL FROM TERRACE?

PLEASE CHECK ONE: DO YOU OWN? \_\_\_\_\_ RENT\_\_\_\_\_ YOUR RESIDENCE?

CIRCLE ONE: IF YOU RENT DO YOU HAVE A LANDLORD'S PERMISSION TO HAVE A PET? YES OR NO

## CIRCLE ONE: IS THERE A BREED RESTRICTION OR WEIGHT LIMIT? YES OR NO

WILL YOUR DOG/CAT BE AN INDOOR DOG/CAT WITH YOUR FAMILY? CIRCLE ONE: YES OR NO

WHAT PERCENTAGE OF TIME WILL THE DOG/CAT BE LEFT ALONE WITHOUT HUMANS EACH DAY? \_\_\_\_\_HOURS.

WHERE WILL THE DOG/CAT BE LEFT ALONE?

What area(s) of the house will the dog/cat be allowed into?

What area(s) of the house will the dog/cat NOT be allowed into?

Where will the dog/cat sleep at night?

What attracted you to become a foster? \_\_\_\_\_

Why do you want a dog/cat? (Check all that apply) \_\_\_\_\_ House pet \_\_\_\_\_ Companion for

family \_\_\_\_\_ Companion for other pet \_\_\_\_\_ Companion for children \_\_\_\_\_ Protection for

home/family	Protection for business	Watchdog	As a gift	Other
(specify)				
What pets have y	you had in the past?			
What happened	to the ones you no longer have?	,		
	,			
What would hap	pen to the dog if you moved: Lo	cally/Out of State/	Dut of Country?	
Where would th	e dog go when you go for vacati	on?		
Do you have a re	gular veterinarian? Yes	_ No		
16	_			
ii yes, vet s name	2			
Name of Clinic				

Will you permit Bumblebeast Dog Rescue to contact your vet? Y/N (Circle)

Signature:

Date		
PLEASE PROVIDE TWO PERSONAL REFERENCES:		
NAME:	PHONE:	
ADDRESS:	CITY:	

Please note that Bumblebeast Dog Rescue mission is to place rescued dogs into the best matched home. Whether the home is temporary foster placement or permanent. All applications are considered. Home visits are required for foster or adoption. Our goal is to ensure that the next home after Bumblebeast Rescue for our adopted dogs and cats is their forever home!