



Forsyth County Animal Shelter



Foster Parent Application

Date: _____

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

E-mail: _____ Work Phone: _____

Do you currently live in a: House: _____ Apartment: _____ Condo: _____ Other(explain): _____

Do you currently: Own: _____ Rent: _____ If you rent, what is the pet policy? _____

Landlord or Rental Agency Name: _____ Phone: _____

How long have you lived at your current residence? _____

How many adults live in your home? _____ How many children? _____ Age(s) of children? _____

Does anyone in your household have pet allergies? _____

Please list any other animals living at your residence:

Animal Type/Breed? _____ Gender? _____ Age? _____

Spayed or Neutered? _____ If you have other pets, are their vaccinations current? _____

Who is your Veterinarian? _____ Clinic name? _____

Are you willing to foster animals that are recovering from injuries? _____

Are you willing to foster animals that have manageable health issues requiring medication? _____

What type(s) of animals are you willing to foster? (Check all that apply)

Dogs: _____ Puppies: _____ Cats: _____ Kittens: _____ Rabbits: _____ Other: _____

Are you willing/able to take neonatal (newborn to 4-week-old) kittens? Yes No

If you can take neonatal kittens, how much experience do you have with fostering them?

None-willing to be trained on how to care for them. **Some**-may need some retraining/refreshment on care

A lot of experience-well versed in neonate care, do not need any training on care

What other animals are you currently fostering? (If any) _____

Please list organization(s) that you are fostering animals for? _____

What other organization(s) have you previously fostered animals for? _____



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Who will be primarily responsible for the care of this foster animal? _____

How many hours will the foster animal be left alone each day? _____

Where will the foster animal be kept at night? _____

Do you have a fenced in yard? _____

-If yes, how high is your fence? _____ Type of fence? _____

-If no, what is your plan for containment and exercise? _____

I like pets that are: Small: _____ Medium: _____ Large: _____ Any size: _____

Describe the temperament and activity level you are looking for in a foster animal (Check all that apply):

High Energy: _____ Lap: _____ Mellow: _____ Affectionate: _____ Outdoorsy: _____ Quiet: _____

I prefer a foster animal that... (Check all that apply)

Can tolerate other animals: _____ Can tolerate children: _____ Can tolerate strangers: _____

My ideal foster animal:

I understand that all Forsyth County foster homes/parents agree to comply with Georgia Department of Agriculture requirements. I also have received and reviewed the Forsyth County Animal Shelter Animal Foster Policy and I agree to comply with same.

Sign Name: _____ Date: _____

Attach copy of Driver's License/Picture ID.

Please return your completed application to: **Forsyth County Animal Shelter**
4065 County Way
Cumming, GA 30028
678-965-7185

You also may scan and email your application to: CMBeebe@forsythco.com

You may also fax your application to: **770-889-8108**