

Sheltie Rescue Foster Home Application

Name _____

Address _____

City _____ State _____ Zip _____

Telephone _____ E-mail Address _____

Occupation _____ Work phone _____

Have you ever owned a Sheltie? Yes _____ No _____

If so, how long? _____

What happened to your last dog? _____

Do you have any other animals? List type, age, and sex _____

Do you foster for any other organization? If so, who _____

Are there other people in the household? _____ If so, list relationships and ages:

Who is your veterinarian? Name _____

Address _____ Phone _____

For how many hours a day would the Sheltie be left alone? _____

While the Sheltie is alone, will it be contained in a crate or other. Please specify _____

Would you be willing to study and evaluate the Sheltie and make a recommendation about a suitable home? Yes _____ No _____

Would you be willing to interview potential owners? Yes _____ No _____

Would you be able to administer medication and transport the Sheltie to a veterinarian if necessary? Yes _____ No _____

Would you be able to provide any of the following types of training?

_____ socialization with people

_____ obedience

_____ other: specify _____

Do you intend to keep the Sheltie indoors or outdoors? _____ Please elaborate:

Do you have a fenced yard or run? Yes _____ No _____

If not, how do you plan to confine the Sheltie to your property? _____

If you are renting, does your landlord approve of your being a Sheltie foster home?

Yes _____ No _____

Landlord's name _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Work phone _____

For how long would you be willing to keep the Sheltie in your home? _____

Are you willing to have two Sheltie Rescue Foster Home Committee members visit your home to approve it as a foster home? Yes _____ No _____

Once you have been approved, are you willing to have a Foster Home Committee member visit your home at other times to verify that conditions in the home have not changed. Yes _____ No _____

How did you hear about Sheltie Rescue? _____

Approved References:

Name _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Work phone _____

Name _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Work phone _____

Foster Home Release Form

Foster home represents they are familiar with the applicable city, county and state laws, ordinances and regulations governing the number, type, and licensing requirements of animals allowed at their place of residence and will provide a copy of said requirements with this agreement. Foster home agrees to at all times operate within said laws, ordinances and regulations. Should Foster home's failure to operate within those guidelines result in citations or the seizure of animals by governmental authorities, including SRCI foster animal, foster home agrees to immediately inform SRCI of the action, and assume the cost of fines or legal fees associated with reclaiming the animal or animals.

I understand that the Shelties that I have agreed to foster home for Sheltie Rescue of Central Indiana have an unknown background; and, therefore, the temperaments cannot be predicted.

I also understand that SRCI has made no promises or representations concerning the temperament of these Shelties or their fitness as a pet or for any other purpose. Further, I understand that SRCI or any individual member will not be responsible for any problems or injuries caused by these Shelties.

Signature of Foster Home Applicant

Witness

Date

RETURN COMPLETED APPLICATION TO:

SRCI Foster Home Coordinator
8149 Palmetto Lane
Indianapolis, IN 46217
317-885-1838 or 317-697-0845

