

# Foster Care Application – Feline

Tails to Tell Animal Rescue Shelter Ltd

Email: [foster@tailstotell.ca](mailto:foster@tailstotell.ca)

Web site: [www.tailstotell.ca](http://www.tailstotell.ca)



## Contact Information

Name: \_\_\_\_\_ Co-Applicant Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Mailing Address if different: \_\_\_\_\_

City, Province, Postal Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Co-App Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

## Family Information

No. of adults in household: \_\_\_\_\_ ages: \_\_\_\_\_ 18-30, \_\_\_\_\_ 31-50, \_\_\_\_\_ 51-65, \_\_\_\_\_ 65+ \_\_\_\_\_

No. of children in household: \_\_\_\_\_, ages: \_\_\_\_\_

Besides your immediate family, are others residing in your home? \_\_\_\_\_

Relationship \_\_\_\_\_ Names and ages: \_\_\_\_\_

Do they share your interest in fostering? \_\_\_\_\_ Is anyone in your home allergic to cats? \_\_\_\_\_

## Home Information

Do you own or rent your home? \_\_\_\_\_ How long have you lived at current address? \_\_\_\_\_

Please describe-house, apartment, townhouse, condo? \_\_\_\_\_ Sq. feet? \_\_\_\_\_

Do you have permission of your landlord/condo board to have animals/foster cat(s)? \_\_\_\_\_

Tails to Tell will require a written letter of consent.

Is a pet deposit required? \_\_\_\_\_ Paid? \_\_\_\_\_

## Current Pet Information

Please list your current pet(s): Name, Age, Species, Gender, and Breed: \_\_\_\_\_

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Are all current pets Spayed/Neutered? \_\_\_\_\_ Up to date on vaccinations? \_\_\_\_\_

Do your current pets get along with other cats? If you think there may be a conflict, please describe how you will keep the foster cat separate from your family pet(s)? \_\_\_\_\_

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## Foster Information

We will use this information to assess your level of experience. Our interest is only to provide a happy and healthy foster experience for the foster family and the felines under care.

How long are you willing to foster a particular animal?

WEEK                  MONTH                  AS LONG AS NEEDED                  OTHER \_\_\_\_\_

Please describe where the cat will stay during the day, at night, and when you aren't home:

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Please check the type of felines you would be interested in fostering:

- Mother and kittens
- Newborn litter of kittens (orphaned, to bottle feed and wean)
- Single or family of kittens (7-12 weeks)
- Special needs – medical
- Special needs – behavioural
- Special needs – shy/frightened to socialize
- Recovering from illness/injury
- Adult – male/female
- Senior
- Any

Are you willing to work with a foster cat on litter box issues if needed? YES / NO

Are you willing to foster a 'Special Needs' cat needing special medical treatment? YES / NO

Would you be willing to bring the cat into shelter for vet visit/medical treatment? YES / NO

Would you be willing to transport cat to Didsbury Vet for any necessary vet care? YES / NO

Have you ever administered medication (pills, topical cream, etc) to an animal? YES / NO

Would you feel comfortable administering medication to an animal? (Demonstration by us) YES / NO

Have you ever administered SubQ or other types of injections to an animal? YES / NO

Would you feel comfortable administering injections to an animal (demonstration by us)? YES / NO

Are you willing to treat or feed an animal several times during night and day? YES / NO

During the day, how long are you away? \_\_\_\_\_hours

At night, how long are you away? \_\_\_\_\_hours

During weekends, how long are you away? \_\_\_\_\_hours

Would you consent to home visits by our staff members? (pre foster and during) YES / NO

Are you willing to meet with potential adopter either in your home or theirs? YES / NO

Why would you like to foster? \_\_\_\_\_

\_\_\_\_\_

Anything you'd like to share? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please provide two personal references.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Contact info: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Contact info: \_\_\_\_\_

Tails to Tell Animal Rescue Shelter covers the medical expenses for all foster animals. Our vet care costs are only discounted through Didsbury Vet and is the only clinic we currently use for routine care. With the obvious exception of a life threatening medical emergency, contact foster coordinator or the numbers provided to you for authorization and clinic for care. If you decide to take your foster to a different vet for convenience or any other reason, Tails to Tell will not be able to cover the cost of the visit. Thank you for your understanding.

I understand that the animals which I agree to foster may have been a stray and in addition I accept and understand the following conditions:

- I acknowledge the cat I am fostering may not be vaccinated, de-wormed, spayed/neutered.
- I acknowledge the cat I am fostering may have or develop a potentially contagious medical condition. (FIV, FeL V, Distemper, parasites, upper respiratory infection)
- I have the right to request the medical history of the cat I am fostering
- I agree to monitor the foster cat for lethargy, loss of appetite, vomiting, severe diarrhea or any serious change in behaviour. If any of these things occur I agree to contact staff for consultation.
- I agree to abide by all rules and regulations set forth by Tails to Tell staff and outlined in the foster manual.
- I understand I am fostering this cat(s) and not adopting.
- If family or friends are interested in adopting, please refer them to shelter for application process.
- I hereby accept temporary possession and responsibility for the animals I foster and release Tails to Tell Animal Rescue Shelter from liability for any injury or damages to any person or property caused by the animal and from any causes of action, claims, suits or demands that may arise as a result of such injury or damages. I understand the risks of working with animals and accept these risks.
- I agree to keep any foster animals under my control and safe; keeping cat(s) indoors.
- Tails to Tell Animal Rescue Shelter will provide necessary food and supplies.
- I will relinquish any foster animal to Tails to Tell Animal Rescue Shelter Ltd upon request.

I/we confirm that the information provided on this form is true and accurate to the best of my/our knowledge.

I/we understand and accept the terms and conditions.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Co-Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_