



1111 South Camino del Rio  
Durango, CO 81303  
Phone: (970)259-2847

## Foster Application

**Thank you for providing the following required information.  
Please feel free to ask any questions as they arise.**

Name (please print) \_\_\_\_\_ Email: \_\_\_\_\_

Street Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ SS or DL# \_\_\_\_\_

Are you at least 21 years old?  Yes  No

Have you already received and read the Foster Care Brochure?  Yes  No

*(if not, please request a copy – you must read this information before you can become a foster parent)*

Have you ever fostered before?  Yes  No

If so, where? \_\_\_\_\_

Will you have adequate transportation while fostering?  Yes  No

**Current type of housing:**

House  Condo or Apartment  Mobile Home  Other

**Do You:**

Rent  Own

If you rent we must have: Landlord's Name \_\_\_\_\_ Landlord's Phone \_\_\_\_\_

**Where will the foster animal(s) be kept:**

During the day? \_\_\_\_\_ At night? \_\_\_\_\_

Describe the animal's play & living area (flooring, bedding, furniture, etc): \_\_\_\_\_

**Who will be responsible for this animal's care  
(Including feeding, watering, cleaning, etc.)?** \_\_\_\_\_

Length of time animal(s) will be interacted with each day:

Less than 1 hour  1-2 hours  3-4 hours  5-8 hours  Over 8 hours

Ages of children in household \_\_\_\_\_

Does anyone in the household have allergies to animals?  Yes  No

If yes, explain \_\_\_\_\_

**What kind of pet would you be willing to foster?**

- Puppies with mom
- Orphaned puppies requiring bottle feeding
- Puppies that do not require bottle feeding
- Adult dog
- Other \_\_\_\_\_
- Kittens with mom
- Orphaned kittens requiring bottle feeding
- Kittens that do not require bottle feeding
- Adult Cat

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Please list the following information for currently owned pets:

Breed	Age	Sex	Spayed/Neutered?	Are vaccines current?	Where is the pet kept?

Please list the following for other pets owned within the last 5 years:

Breed	Age	Sex	Spayed/Neutered?	What happened to this animal?

Have you ever had a dog impounded by Animal Protection or picked up as a stray?  Yes  No

Have you ever surrendered your own animal to a shelter before?  Yes  No

Have you ever had an animal killed on the highway or street?  Yes  No

Have you ever had an animal poisoned?  Yes  No

If you answered "yes" to any of the above, please explain: \_\_\_\_\_

Are you willing to allow an agent of the La Plata County Humane Society to visit your home to inspect the area in which you intend to house foster animals?  Yes  No

Would you also like to be added to our list of emergency fosters? (*Emergency fosters care for the pets of other members of the community who are temporarily evacuated from their homes due to natural disasters or other emergencies*)  Yes  No

**I confirm that all information provided on this application is true and correct. I understand that by giving false information, I will be ineligible to foster any animal, now or in the future, from the La Plata County Humane Society.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**THANK YOU FOR YOUR INTEREST IN JOINING OUR FOSTER PROGRAM!**

Approved by \_\_\_\_\_ Date \_\_\_\_\_ Notes \_\_\_\_\_