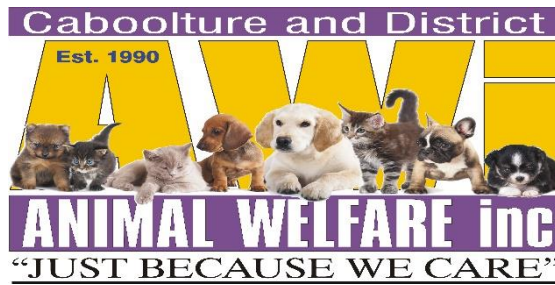


2/11 Pasturage road

Caboolture. 0455778166



FOSTER CARERS APPLICATION

Surname _____ First Name _____

Address _____

Phone _____ Mobile _____

Email _____

Occupation _____ Full time / Part time Approximate time at home _____

Do you have children at home? Yes No Ages _____

What is your preference for fostering? (circle) Dogs Puppies Cats Kittens

Preferred Dog Sizes Large Medium Small Would you accept a mother and its litter? Yes No

Would you accept an animal undergoing medical treatment? Yes No

Do you currently have pets at home? Yes No Details _____

Are they fully vaccinated and wormed regularly? Yes No

Are there any transmissible diseases that your pets have suffered from? Yes No If Yes please provide details _____

Do you live in rented premises? Yes No If yes do you have the Landlords permission? Yes No

Are you able to contain these animals within your grounds at all times? Yes No

Can you provide exercise and stimulation for these animals? Yes No

Do you have reliable transport and are you willing to transport these animals if required? Yes No

Are you in agreeance for potential owners viewing animals at your residence? Yes No

Do you authorise your contact number (not address) being made available when advertising? Yes No

Would you accept a CADAWI staff member inspecting your property? Yes No

Please detail any experience you may have had in fostering and /or raising animals

Continued over page

DECLARATION

By signing this agreement, I understand and acknowledge that.....

- * The animals will remain the property of Caboolture and District Animal Welfare Inc (CADAWI) whilst they are in foster care and are not to be sold or given away unless under arrangements with CADAWI.
- * I will make these animals available for adoption, de-sexing and/or any other treatment that may be necessary.
- * Animals will be returned to CADAWI if requested.
- * Despite best endeavours fostered animals may be euthanised if they do not meet behaviour and/or health requirements which will be totally at the discretion of CADAWI.
- * The local council may view my personal foster home details.
- * That CADAWI, or a representative from CADAWI will not be responsible or liable for any damage to property or personal that may be caused by the foster animal.

Signature

Date

OFFICE USE ONLY

Property Inspected Date _____ Name of CADAWI rep. _____

Fencing adequate Yes No Type _____

Surrounds suitable and safe Yes No Details if applicable _____

Dog Tag ID No.s _____ Yellow Adoption Card No.s _____

CHECK LIST

Carers Kit provided

General obligations advised

Acceptance advised