



Foster Care Provider Application

We Are Animal Guardians, Inc.

This questionnaire must be completed by an individual/family interested in providing foster care. The information provided will help to ensure the best possible animal placement for your home.

Name: _____ Date: _____

Address: _____

Phone: Day: _____ Evenings: _____

General Animal Information:

What type/number of pet(s) would you like to provide care for?

____ Cat(s) ____ Kitten(s) ____ Cat with litter of kittens

____ Dog(s) ____ Puppy(s) ____ Dog with litter of puppies

Other: _____

What length of time are you willing to keep a foster pet? _____

Are there any restrictions as to the type or size of pet you can foster? _____

The foster dog will be kept:

____ indoors and taken outside for walks on a leash

____ indoors and have periodic access to a fenced yard

____ confined within the house; areas:

How many hours a day would the pet be left alone? _____

Are you able to bath/groom/medicate a foster pet? Yes No

Do you have any objections to W.A.G. representative visiting your home? Yes No

Would you be able to transport the pet to a veterinarian? Yes No

Please list the type of pets you currently have in your home:

SPECIES	BREED	AGE	SEX	SPAY/ NEUTER?
				Yes No
				Yes No
				Yes No
				Yes No

Who is your pet(s) veterinarian? _____ Phone: _____

If you do not currently own a pet, please describe your prior experience with pet ownership.

General Family And Home Information:

How many adults in your household: _____

Number and ages of children in your household: _____

Is any member of your family allergic to pets? Yes No

If yes, please explain: _____

Do you own or rent your home? _____

 If you rent, please provide your landlord's name, address, and phone numbers:

I certify that all information I have given on the foster care program application is true and correct.

Signed: _____

Date: _____

Completed forms are to be returned Attention: Adoption Coordinator.

You may either mail to:

 WAG

 PO Box 542

 Weare, NH 03281

Or,

 Fax to 603-369-4651