

Have you ever owned a pet before? Yes No

Please list your pets (living and deceased within past 5 years):

Type of Pet	Name	Age or Deceased <small>(if deceased indicate year and cause)</small>	Spayed/ Neutered	Is the animal current on vaccines?	Vet Name and Phone Number

Is your dog on Heartworm preventative? Yes No

Has your cat been tested for FeLuk/FIV? Yes No

Where do you keep your current pets? Inside Outside Both – Describe _____

Where do you intend to keep this pet? Inside Outside Both – Describe _____

Where will this animal sleep? Crate Dog/Cat Bed Family Member's Bed
 Basement Garage Outside Kennel

How long will this pet be left alone each day (crated or otherwise unattended)? _____

Have you ever given up a pet for adoption? Yes No

If yes, please explain why, and where the pet is now: _____

Under what circumstances do you feel it appropriate to give up a pet? _____

Do you currently have or have you recently had any cats or kittens which have Feline Leukemia, Feline Aids or Distemper Virus OR any dogs or puppies with the Parvo or Carona Virus? Yes No

If yes, please explain how you intend to keep this pet separated from the infected pet(s): _____

Do you have any family members with allergies or other health conditions that may impact the outcome of a foster situation? Yes No

If yes, please explain: _____

Please provide the following information for all current and deceased pets (within the past 5 years):

Name of Veterinarian: _____

Address: _____

Telephone Number: _____

What veterinarian do you intend to use for this pet? _____

Please list two (2) character references who do not live with you:

**** One reference should be a non-relative**

Name	Phone Number and/or Email	Relationship**

Briefly describe why you feel you could provide a good foster home:

By signing this application, you are consenting to allow a Furry Friends Network Representative to contact your veterinarian to obtain pet history and medical information.

Please read and sign below:

I certify that all information in this application is true. Furthermore, I understand that if the information contained herein is found to be false, my application will be voided and any pending adoption refused.

Applicant Signature

Date