



FOSTER APPLICATION AND AGREEMENT

Feral at Rescue, Inc. (FCR) is a group of individuals who are dedicated to finding loving homes for homeless cats and kittens in St. Mary's County. FCR is always seeking volunteers who love animals.

Please take the time to complete this application and return it to us via email or regular mail. After reviewing the information you provide, one of FCR's members will contact you regarding your time of availability and the volunteer activities in which you have expressed an interest.

Personal Information:

| | | | |
|---|--------------|------------------------------------|----------------|
| First Name: | Middle Name: | Last Name: | Date of Birth: |
| Address: | | City, State & Zip Code: | |
| County: | Home Phone#: | Cell Phone#: | |
| E-mail: | | How do you prefer to be contacted? | |
| <p>Attention Renters or Condo Owners: A copy of your homeowner's association agreement or your lease or a notarized statement from your landlord/assoc. confirming that a cat is permitted must be attached to the application or it can't be processed.</p> | | | |
| Do you <input type="checkbox"/> Own <input type="checkbox"/> Rent? --- If renting does your lease allow pets? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Please list all states and counties you lived in the past 10 years: | | | |
| Landlord's Name: | | Phone #: | |
| Employer's Name: | | Phone #: | |

Current Pets:

| Name: | Sex: | Age: | Breed: | Spayed/Neutered: | Veterinarian: | Years of Ownership: |
|-------|---|------|--------|------------------|---------------|---------------------|
| | M <input type="checkbox"/> F <input type="checkbox"/> | | | | | |
| | M <input type="checkbox"/> F <input type="checkbox"/> | | | | | |
| | M <input type="checkbox"/> F <input type="checkbox"/> | | | | | |
| | M <input type="checkbox"/> F <input type="checkbox"/> | | | | | |
| | M <input type="checkbox"/> F <input type="checkbox"/> | | | | | |

Where do your current pets stay while unattended? (Check any that apply)

- In house, crated or confined
- Garage
- In house, free roam of the house
- Basement
- Outdoors
- Other (please explain) _____

Volunteer Information:

Please describe why you are interested in volunteering for Feral Cat Rescue Inc.

Do you have any experience, past or present, working with animal rescue? YES NO

If yes, which organization: _____

It may take your foster animal a month or longer to adjust to its new home. During that adjustment period, some undesirable behaviors may emerge, such as housebreaking issues, and intestinal distress. Are you prepared and/or willing to work through the adjustment period with a foster animal? YES NO

If no, why not? _____

Family/Household Information: (Please list all household members)

| First Name: | Middle Name: | Last Name: | Birthdate: | Relationship: |
|-------------|--------------|------------|------------|---------------|
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Have you discussed what impact your volunteer activist could have on your family life (i.e. fostering and animal, time away from your family, etc.): YES NO

I am interesting in fostering: (check all that apply)

- Healthy Adult Cat
- Healthy Kitten
- Special Needs Cat
- Special Needs Kitten
- Pregnant Cat

How many hours per day will the animal be unattended? _____

Approximately how many hours per week do you have available for volunteer activities other than fostering?

Please check the volunteer activities in which you would like to participate:

- Transportation
- Humane Education
- Adoption Events
- Fundraising
- Trapping
- Feeding Colonies
- Other _____

Are you willing to transport animals in your own vehicle? Yes No

Foster Agreement Contract

I, _____, hereby agree to abide by the following terms during the time I am a volunteer with Feral Cat Rescue Inc.:

- A. I will treat all FCR animals in a responsible and humane way.
- B. I will remember in all my dealings with the public that I represent FCR.
- C. I agree that any animal in my care, whether through foster home or volunteer activities, remains the possession and property of FCR until that animal is placed in a permanent home.

I accept full responsibility for any and all expenses incurred during my tenure as a volunteer for FCR, except those pre-approved by FCR. In the event I resign as a volunteer, I hereby agree to return any foster animals in my possession and all FCR records and/or FCR property to FCR within 14 days of resignation.

I have accurately completed this application and I understand the risks involved in working with rescued animals. I understand that FCR cannot be responsible for the actions, behaviors, and/or medical conditions of the animals that it seeks to rescue. I agree to assume the risks implicit in working with animals which may have been abandoned, beaten, or otherwise mistreated, abused or may suffer from illness or disease.

AGREED TO BY VOLUNTEER:

Signature

Date

Applications can be mailed to:
Feral Cat Rescue, Inc.
Po Box 623
Great Mills MD 20634

Or emailed to:
info@feralcatrescuemd.org

OFFICE USE ONLY:

| | |
|--|--------------------|
| Accepted by: | Date accepted: |
| Reviewed by: | Date reviewed: |
| Approved by: | Approval date: |
| Denied by: Date denied: Foster Contacted on: | Reason for denial: |