

PITSTOP PIT BULL RESCUE TRANSPORT FOSTER CARE APPLICATION

| 1, | (name of foster applicant), |
|--|-----------------------------|
| agree that all statements in this application are made based purposes of my application to foster one or more animals the Foster Care Program. | • |
| • I would like to foster PitStop Pit Bull Rescue Transport - re | scued animals. |
| Number of animals I can foster | |
| □ I have a preference for specific animals (List of their Name | e's): |
| ☐ If any of the animals I specified are unavailable, I am open Restrictions on the type of animal I can foster (For example, "Only Puppies", etc.) | e, "No dogs over 30 lbs", |
| Where my foster animals will sleep at night: | |
| Where my foster animals will stay during the day when I am | n home: |
| Where my foster animals will stay during the day when I am | not home: |
| | |

| my foster animal and all the anim | all Rescue Transport is very concerned about th nals in its custody, as well as its ability to keep t Bull Rescue Transport will not share this inforr | track of all animals |
|-----------------------------------|--|------------------------|
| not connected to the Foster Care | • | mation for any reasons |
| My Name | Home Phone | _ |
| Address | Cell Phone | _ |
| City, State, Zip | Work Phone | _ |
| Email* | | _ |
| • | cue Transport to text me at the cellphone num Rescue Transport to text me at the cellphone r | |
| | method of communication from PitStop Pit Bu ılarly, please tell us how to best get in touch wi | - |
| Driver's License Number | State of Issuance | |
| Name, address and telephone nu | ımber of my employer (or business, if self-emp | ployed): |
| Business Name | Telephone | _ |
| Address | My Position | _ |
| City, State, Zip | Length of time with this employer | _ |
| Housing: | | |
| • | ted to bring an animal or animals into my dwel ted to bring an animal or animals into my dwel | _ |

| Landlord's Name (if Rental) Telephone Address |
|---|
| City, State, Zip |
| Length of time at this residence: |
| Fencing: □ I have a fenced-in yard. |
| Height of fence What is it made of? |
| ☐ The fence has a gate. ☐ The gate has a lock. Description of the latching and locking mechanism: |
| Companion Animals: |
| • I have companion animals at my home currently. |
| I have copied this page (one for each animal), and I have provided details for: |
| (1) all companion animals currently at my home, followed by(2) all companion animals I have had at my home in the last 5 years who are no longer with me (including any fostered animals). |
| Details for One Companion Animal |
| Name Age Species (dog, cat, etc.) Breed (for dogs only) Gender |
| □ Currently residing in my home.□ Lived in my home in the last 5 years, but no longer with me. |
| What happened to him / her? |
| |

| □ Spayed/Neutered □ I have bred this animal in the past. □ I am currently breeding this animal. I had elective surgery performed on this | s animal : | □ Cat declawed | □ Dog debarked |
|---|--------------------------------------|---------------------------------------|----------------|
| □ Other (specify) | | | |
| Where I got this animal | | | |
| Percentage of time he/she spends outs | ide | | |
| Where he/she sleeps at night | | | |
| Where he/she stays during the day whe | en I am hon | ne | |
| Where he/she stays during the day whe | en I am not | home | |
| Vaccinations administered: | | When: | |
| | | | |
| | | | |
| The name of the veterinarian(s) I use to please list all veterinarians consulted in additional veterinarians): | • | • | |
| Name of specific veterinarian I use | Name of | specific veterinaria | an I use |
| Clinic Name | Clinic Na | me | |
| Address | Address | | |
| Telephone | Telepho | ne | |
| I have been a client of this vet for | I have been a client of this vet for | | |
| Records are under the name of | Records are under the name of | | |
| | | · · · · · · · · · · · · · · · · · · · | |

| <u>Children:</u> | | |
|---|---|-------------------------------------|
| • I have children in th | e house. Ages: | |
| | nouse and/or who have regular con include family, friends, domestic er | |
| | is my | |
| Name Relationship | , | |
| | is my | |
| Name Relationship | | |
| | is my | |
| Name Relationship | ic mu | |
| Name Relationship | is my | |
| • | is my | |
| □ I will not leave my foster do statement and consent. | og alone with any children in the ho initials | me. By initialing I understand this |
| References: | | |
| • List of two references – peo companion animals and have | ple who know me (but are not related been to my home recently: | ted to me) and my |
| | is my | |
| Name | Relationship | Phone |
| | is mv | |

Rescue Responsibilities: PitStop Pit Bull Rescue Transport will provide crate, collar, leash, food, medical care and access to adoption events and /or adoption advertising via websites like i.e. Pet Finder, etc. to network the animal for adoption.

Relationship

Phone

Name

Foster Responsibilities: Create a schedule for the dog and maintain it (feeding, walking, exercise, etc.) Continue work on basic commands (sit, stay, leave it, no jumping, etc.), this will help your foster pet get adopted. Communicate regularly with PitStop Pit Bull Rescue Transport on the health and well-being of your foster pet. At the first sign of health issue, contact PitStop Pit Bull Rescue Transport for assistance.

| $Do\ you\ agree\ to\ contact\ PitStop\ Pit\ Bull\ Rescue\ Transport\ if\ foster\ has\ any\ medical\ concerns\ ?\underline{\hspace{1.5cm}}initials$ |
|--|
| Do you agree to always keep foster on leash while outside? initials |
| Do you agree to always keep foster kenneled while unsupervised? initials |
| Do you agree to obtain PitStop Pit Bull Rescue Transport permission prior to taking foster to any adoption events? initials |
| Do you agree to follow PitStop Pit Bull Rescue Transport instructions specific to the foster? initials |
| I, the undersigned, hereby voluntarily releases, discharges, waives and relinquishes any and all claims or causes of action for personal injury, property damage, or wrongful death which may arise out of or in connection with my participation as a foster/volunteer for PitStop Pit Bull Rescue Transport, Inc. Each of the undersigned further expressly agrees that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the State of Florida and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. I hereby acknowledge and confirm that I have read and voluntarily signed this Release of Liability, and further agree that no oral representations, statements or inducements apart from the foregoing written agreement have been made. |
| Dated this, 201 |
| Name of Foster: |
| Signature: |
| PitStop Pit Bull Rescue Transport Authorized Signature (as its President): |
| Date: |