Dog Foster Application



dogs@nwtspca.com

Applicant Information				
First Name:		Last Name:	Are you over 18 years old? Yes No	
Address:		City:	Postal Code:	
Email:			Phone:	
References – please provide 2				
Name:		Email:		
Name:		Email :		
Membership (required for insurance purposes)				
Membership Type:		Payment Date:	Amount/Type:	
Your Home				
Rent Own	Landlord Name: Landlord Phone Number:			
Where will the dog be kept? Check all that apply.				
Fenced yard Indoors Crate/Kennel Staked out The People in Your Home				
Name		Relationship	Age (if a minor)	
1)				
2)				
3)				
How much experience do you have with dogs and what kind (Training etc.)? What type of exercise will you do with your foster dog and how often?				
Your Current Pets				
Name	Туре	Age Tem	perament	
1)				
2)				
3)				

WNWT SPCA

Type of Fostering – to be completed with Foster Coordinator				
What age of dog are you interested in fostering? Check all that apply. Puppy Juvenile Adult Senior Are you comfortable administering medication and/or changing bandages? Yes No No Are you able to bring your foster dog to the vet when required? Yes No Vill you be willing to bring your foster dog to public hours and NWT SPCA events? Yes No We are able to provide some equipment on a loan basis as needed. What equipment will you need to foster? Crate Collar Bowl(s) Running Leash/Leash Toys Other				
Signature				
I warrant and confirm that the information given in this application is true and correct and I understand that it is being used to determine my compatibility and responsibility for the animal. I understand the NWT SPCA reserves the right to refuse any applicant or to terminate any existing fostering agreements it currently holds without any reason. I understand that my role is solely as a temporary home and the placement of any animals I foster will be conducted by the NWT SPCA. It is the responsibility of the NWT SPCA to review and interview potential adopters. I understand the NWT SPCA will require me to make available foster animals to meet and visit potential adopters. I understand I am fully responsible for the health, safety and general wellbeing of the foster animal throughout the duration of its fostering time with me. I will not hold the NWT SPCA liable for any damage, injury or harm cause directly or indirectly through my fostering activities with the NWT SPCA. I will comply with all City by-laws regarding the care of any foster animals.				
Date Signature of Applicant Witness				
Office Use Only O Home Check O Landlord Approval				
Supplies sent out with foster:				
Notes:				