



Back Street Cat Rescue, Inc

214 Maple Ave
Bethesda Ohio 43719

CAT FOSTER APPLICATION

APPLICANT INFORMATION

Name: _____ Date of Birth: _____
 Street Address: _____ Mailing Address: _____
 City: _____ State: _____ Zip: _____ (If different) _____
 Home Phone: _____ Employer: _____
 Cell Phone: _____ How long with this employer? _____
 Email Address: _____

HOUSEHOLD INFORMATION

List the names, ages and relation of all adults in the Household: _____

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DWELLING INFORMATION

Type of housing you live in: Single Family House Apt/Condo Townhouse
 Do you rent or own: Rent Own If rent, are cats permitted? yes No
 If rent, list your landlord's name and phone number: _____

How long have you lived at this address? _____
 Where will the cat(s) stay when you are not home? Room Loose in home Basement Garage
 Other Explain: _____

CURRENT PET INFORMATION

List your current pet(s)
 Name: _____ Cat/Dog Age _____ Gender _____ Male Female Spay/Neutered Yes No _____
 Name: _____ Cat/Dog Age _____ Gender _____ Male Female Spay/Neutered Yes No _____
 Name: _____ Cat/Dog Age _____ Gender _____ Male Female Spay/Neutered Yes No _____

Name and phone number of your current veterinarian: _____

Are your current pets on a monthly flea preventative treatment? Yes No
 Are your current pets up to date on their vaccinations? Yes No
 Are your current cat(s) Indoor only Indoor/outdoor Outdoor mainly
 Have your cat(s) been tested for Feline Leukemia (FeLV) Yes No Are they FeLV positive? Yes No
 Have your cats been tested for FIV (Feline AIDS)? Yes No Are any FIV positive? Yes No
 What type of food do you feed your cats? Dry food only Dry & Canned Food Canned Food Only
 What brands of food do you use? _____

If you think there may be a conflict, please describe how you will keep the foster cat(s) separate from your family pets?

FOSTER INFORMATION

Why do you want to foster for BSCR? _____

Have you ever fostered a cat for a humane organization or animal shelter before? _____ Yes _____ No
If yes, which group(s) and when? _____

Are you willing to have someone from BSCR visit your home for a home visit? _____ Yes _____ No
Are you willing and able to cover the costs of caring for a foster cat except medical expenses? _____ Yes _____ No
Are you willing and able to transport the cat(s) to a BSCR approved veterinarian for needed _____ Yes _____ No
Are you willing and able to transport the cat(s) to BSCR locations at least once per weekend? _____ Yes _____ No
Are you willing to foster an FIV or FeLV positive cat? _____ Yes _____ No
Do you have extra cat supplies (litter pan, dishes, cat bed, etc.)? _____ Yes _____ No
Are you familiar with the techniques of introducing another animal into the household? _____ Yes _____ No
Do you have a separate room or space where you would keep a foster cat? _____ Yes _____ No
Do you have a cage/kennel? _____ Yes _____ No
Are you able to give: _____ Liquid medications _____ Pills _____ Injections
List any animal experience (medical, training, etc.) that will help you in fostering: _____

Gender of cat(s) willing to foster: _____ Male _____ Female _____ Both
Please check the types of cat(s) you are willing to foster:

- Kittens requiring bottle feeding
- Pregnant mothers
- Cat with a physical handicap
- Cat recovering from illness/injury/surgery
- Kittens not requiring bottle feeding
- Mothers with litter of kittens
- Cat on daily medication
- Cat that has been abused, neglected, or stressed and could have behavioral problems

Note: BSCR covers medical expenses for all foster cats. However, our veterinary care costs are only discounted through a particular veterinarian and therefore they are the only clinic we currently use for routine care. With the obvious exception of a life threatening medical emergency, if you should decide to take your foster cat to a different veterinarian for convenience or any other reason, BSCR will be able to cover the cost of the visit. Thank you for your understanding.

All the information I have provided on this application is, to the best of my knowledge, true and complete. I understand that falsifying answers on the application, or at any other time during the fostering process, disqualifies me from fostering.

The process takes approximately 7 – 14 days, and we are all volunteers, so please be patient.

I understand that once the contract is signed and I have taken possession of the cat(s), I will be solely responsible for any actions of this cat and I agree to hold harmless BSCR and its representatives from any liabilities, injuries, or loss caused by this cat or any causes of actions, claims, suits, or demands that arise from such injury, damages, or losses.

FOSTER APPLICANT NAME (PRINT) _____

FOSTER APPLICANT SIGNATURE _____

DATE _____