

○ YES

○ NO

## FOSTER CARER APPLICATION

NAME									
ADDRESS									
TELEPHONE NUMBER		work		MOBILE					
EMAIL ADDRESS									
TYPE OF ANIMAL YOU OAT		R LL/LARGE DOG		<b>О</b> ВОТН					
BREED PREFERENCE									
ACCOMMODATION UNIT	ODUPLEX	OHOUSE							
DO YOU OWN THIS PE	ROPERTY?								
LANDLORD DETAILS									
DO YOU HAVE PERMIS	SSION TO HAVE PE	ETS?							
YARD TYPE  HIGH/LOW	) FENCED	ି LARGE	SMALL	O ACREAGE					
DO YOU WORK?  YES	○ NO								
HOW MUCH TIME CAN YOU SPEND WITH THIS ANIMAL EACH WEEK?  LESS THAN 10 HRS 10-20 HRS 20-40 HRS MORE THAN 40 HRS									
WHERE WILL THE ANIMAL BE HOUSED?  O INDOORS O OUTDOORS									
ARE YOU PREPARED TO KEEP CAT INDOORS?  O YES NO									
DO YOU HAVE ANY OT YES PET DETAILS,									
HOW MANY CHILDREN? AGES?									
DO YOU HAVE EXPERIENCE IN DOG OBEDIENCE TRAINING?  YES NO									
ARE YOU PREPARED TO GROOM, TRAIN AND EXERCISE OUR FOSTER DOG?  YES NO									
ARE ALL YOUR FAMILY MEMBERS COMFORTABLE ABOUT FOSTERING OUR ANIMALS?  YES  PLEASE EXPRESS CONCERNS									

CAN YOU TRANSPORT YOUR FOSTER ANIMAL TO ANY PROMOTIONAL ACTIVITIES WHEN POSSIBLE?



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I/We understand that the foster animal(s) are the sole property of Friends of the Pound and agree to return the foster animal(s) to the Friends of the Pound upon request.

I/We agree to provide the foster animal(s) with a loving and secure temporary home. This includes maintaining the animal(s) in good health, providing the animal(s) with adequate high quality food, fresh water at all times, a soft comfortable bed, training, guidance, regular supervision and unlimited love, affection and patience.

I/We agree to care for the foster animal(s) as requested by Friends of the Pound and agree to regular monitoring of the fostering process by the Friends of the Pounds Foster Care Co-ordinator.

I/We agree to report any injuries to the foster animal(s), or incidences where the animal(s) is at risk, to the Friends of the Pound Foster Co-ordinator as soon as possible.

I/We understand that it is my responsibility to take reasonable care to ensure my and my family members safety when dealing with foster animals.

I/We agree to report any incidents or injuries to myself or family members, to Friends of the Pound Co-Ordinator as soon as possible.

I/We understand that Friends of the Pound will provide all necessary veterinary care and equipment for the foster animal(s) and that any veterinary care is to be carried out by the veterinarian approved by Friends of the Pound, except in an extreme emergency.

I/We understand that the foster animal(s) must be kept in such a manner as to comply with the NSW Companion Animals Act 1998.

I/We accept full responsibility for the foster animal(s) whilst in my/our care. Friends of the Pound will accept responsibility for any damage caused by the foster animal(s) whilst in their foster home.

I/We understand that by signing this form I/We become a member of Friends of the Pound Tweed Inc.

I have read the above Foster Carer conditions and agree to the conditions stated in the agreement and that my personal details on Foster Carer Application are true and correct

SIGNED		
PRINT FULL NAME(S)		
DATE OF AGREEMENT		

FOP Rehoming Centre @ 100% PETS
Harvey Norman Centre, Greenway Drive, Tweed Heads South
t: 07 5524 8590 | PO Box 164, Banora Point NSW 2486 | e: info@friendsofthepound.com