

Maryland SPCA Foster Program Application

Please answer the following questions to provide the MDSPCA with your background information on the type of foster care you can provide our animals. Upon receipt of the application, the Foster Coordinator will contact you to set-up an appointment to discuss the program in greater detail and answer any questions you may have. Please understand that due to the large amount of applications received it may take up to a week for contact to be made.

First _____ MI ____ Last _____ Date _____

Address _____

City _____ State _____ Zip _____

Phone # _____ Alternate Phone # _____

Email Address _____

Driver's License (State and number) _____

Employer _____ Position _____

Birth Date _____ Sex (circle one) **Male** **Female**

• Type of housing: House Apartment Condominium Other _____

• If rental property, have you approved fostering animals with your landlord or condo association?
Landlord's Name: _____ Phone #: _____

• Please list other members of the household, their age, and relation to you:

• Will any other people help with your foster duties? If so, who?

• Do any members of your household have a cat or dog allergy? If so, who?

• What is your typical work schedule?

- What experience, if any, have you had with animals?
- Which of the following animals are you interested in fostering? Please check all that apply.

Animal	
Puppy (under 1 year)	
Dog	
Kitten (under 1 year)	
Cat	
Mom & puppies	
Mom & kittens	
Any	

Situations	
Too young/underweight	
Illness	
Injury	
Socialization	
Bottle Babies	

- If you can foster puppies or kittens, are you willing to foster a litter, and if so, how many?
- Please provide information regarding your pet(s) presently at home:

Name	Species/Breed	Age	Sex	Altered?

- Are all of your animals up to date on their vaccines? **YES** **NO** **NOT SURE**
(Please bring proof of vaccines when you come for your interview)
- If you have dogs, are they vaccinated for kennel cough (bordatella)? **YES** **NO** **NOT SURE**
- What is the name and contact information of your current veterinarian:

- Why would you like to become a foster parent?
- Do you have any prior volunteer or foster experience with other animal welfare organizations?
- How did you hear about our foster program?
- Please list your general availability to meet with the Foster Coordinator:
- Do you have any question or topics you want to discuss during your interview?

Please return completed applications to:

Maryland SPCA
Attn: Rae Borsetti
3300 Falls Road
Baltimore, MD 21030
Fax: 410-235-3173
Phone: 410-235-8826 x147
Email: rae@mdspca.org

On behalf of the animals, the Maryland SPCA thanks you for your interest in the Foster Program and we look forward to meeting you soon!

I hereby acknowledge that all the information provided above is correct to the best of my knowledge. I also understand the health risks to my own animals. I understand that all volunteers are subject to a background check.

Signature

Date

<i>Volunteer Department Use Only</i>	
Review Date _____	Interview Date _____
Comments _____	

Agreement Received _____	Orientation Attended _____

Foster Care Agreement

I agree to the following conditions:

- ~ I certify that my own pets are currently up-to-date on their vaccinations. FVRCP and Rabies are required for cats. Dogs are required to have Canine Distemper (DA2PPv or DHLPP), Bordetella and Rabies. The vet will be called to confirm, or you can provide us with verification.
- ~ I understand that it is suggested that I keep my pets separate from the foster animals for at least the first week. If introduced, I will supervise the animals. If the animals do not get along, I agree to keep them separate. **I understand that there are risks to introducing foster animals to my own and I assume that risk.**
- ~ Should the foster animal(s) become ill while in my care, I will call the Foster Coordinator at **410-235-8826, ext. 147 (during business hours)** or if it is after hours and an emergency please call: **443-519-6477**.
- ~ I will only bring the foster animal(s) to an emergency vet if instructed to do so by a representative of the MDSPCA. **If the MDSPCA did not recommend an emergency vet visit, I agree to take responsibility for any costs associated with this visit. I also agree to notify the MDSPCA and provide records from this visit.**
- ~ I fully understand that the foster animals are the property of The Maryland SPCA. I agree to follow any decisions made by the MDSPCA regarding the return and/or the disposition of the foster animal(s).
- ~ I agree to return the foster animal(s) as instructed to do so. I understand that a Foster representative and I will set a tentative return date at the time I pick up the pet.
- ~ I agree not to post pictures of my foster animals on Facebook or any other internet site unless given permission by the Foster Coordinator.
- ~ I agree to notify the MDSPCA if the foster animal(s) escape(s) from my home.
- ~ I understand that I must have a current tetanus vaccination and report all bites and scratches to the Foster Coordinator.
- ~ I agree that due to health risks, I am not to take any foster animals to parks, pet stores or other areas of high activity.
- ~ I will solely foster for the Maryland SPCA unless I otherwise notify the Foster Coordinator.
- ~ I recognize and acknowledge that working directly with animals entails inherent risks of injury to person and damage to property, and that The Maryland SPCA cannot assume this liability, and I do hereby waive any and all claims which I might otherwise have against The Maryland SPCA because of injury to my person or damage to my property resulting from any activity in which I might engage for the MDSPCA;
- ~ I have reviewed the handouts on bite safety and protocol and I understand that there is always a risk of being scratched and bitten. I also understand that I must have my own medical insurance.