



HAPPY TAILS DOG RESCUE, INC.

CAT FOSTER WITH INTENT TO ADOPT APPLICATION

DATE: _____

NAME OF CAT YOU ARE INTERESTED IN FOSTERING WITH INTENT TO ADOPT: _____

NAME: _____

ADDRESS: _____

TOWN/STATE/ZIP: _____ EMAIL: _____

HOME PHONE: _____ CELL PHONE: _____

EMPLOYER: _____ JOB TITLE: _____

EMPLOYED SINCE: _____ WORK PHONE: _____

DATE OF BIRTH: (**WE DO NOT FOSTER/ADOPT TO ANYONE UNDER THE AGE OF 21**) _____

ABOUT YOUR HOUSEHOLD:

WHERE DO YOU LIVE? HOUSE/APARTMENT/CONDO/TRAILER/OTHER: _____

DO YOU RENT, OWN, OR LIVE WITH PARENTS/FAMILY/FRIENDS? _____

LANDLORD'S/PARENTS'/OTHERS' NAME: _____ PHONE # _____

DO THEY ALLOW PETS: _____

IS A DEPOSIT REQUIRED _____

DO YOU HAVE A FENCED IN YARD? _____ HOW HIGH IS THE FENCE? _____

DOES YOUR SPOUSE/SIGNIFICANT OTHER/ROOMMATE KNOW THAT YOU ARE FOSTERING AN ANIMAL? _____

WHAT IS HIS/HER FIRST NAME & PHONE # SO WE CAN CONFIRM? _____

NUMBER OF ADULTS IN HOME? _____ NUMBER OF CHILDREN IN HOME? _____

AGES OF ADULTS? _____ AGES OF CHILDREN? _____

ANYONE AT HOME ALLERGIC TO ANIMALS? _____

ABOUT YOUR PETS AND VETERINARY CARE:

WHO IS YOUR VETERINARIAN? _____

PHONE # _____ HOW LONG HAVE YOU BEEN USING THIS VET? _____

IS THE ADDRESS ON THIS APPLICATION THE ADDRESS ON FILE WITH YOUR VET'S OFFICE? _____

IS THE ACCOUNT IN YOUR NAME? _____

IF NOT, WHO IS THE HOLDER OF THE VET'S ACCOUNT? _____

WHICH OF YOUR PETS HAS THIS VET BEEN CARING FOR? _____

WHAT TYPE(S) OF PETS DO YOU OWN OR HAVE OWNED IN THE LAST 10 YEARS?

NAME	TYPE/BREED	AGE	SPAY/NEUTERED	GENDER	STILL ALIVE?

HAVE YOU EVER GIVEN UP A PET/SURRENDERED IT TO A SHELTER? _____

IF SO, WHY? _____

IF YOU CURRENTLY OWN A CAT(S), ARE THEY:

INDOORS, OUTDOORS, OR BOTH? _____

DECLAWED? _____ IF YES, REASON FOR DECLAWING: _____

NEGATIVE FOR FIV & FELINE LEUKEMIA? _____

UP TO DATE ON SHOTS? _____ IF NOT, WHY? _____

IF YOU CURRENTLY OWN A DOG, IS YOUR DOG UP TO DATE ON SHOTS AND MONTHLY WELLNESS (SEE TABLE BELOW)?

SHOT/PREVENTATIVE	IS YOUR DOG UP TO DATE? YES/NO	DATE LAST GIVEN	WHAT IT PROTECTS AGAINST
DAPP2V			DISTEMPER, ADENOVIRUS, PARVO, PARAINFLUENZA VIRUS
BORDETELLA			KENNEL COUGH
RABIES			RABIES
FLEA & TICK			FLEAS & TICKS
HEARTWORM PREVENTATIVE			PROTECTS AGAINST HEARTWORM

REFERENCES:

REFERENCES ARE REQUIRED TO COMPLETE THE APPLICATION PROCESS. PLEASE PROVIDE THREE (3) BELOW:

NAME	PHONE #	RELATIONSHIP TO YOU

A REPRESENTATIVE OF HAPPY TAILS DOG RESCUE, INC. MAY NEED TO CHECK THE HOME, AT ANY REASONABLE TIME (8:00 a.m. – 8:00 p.m.), TO MAKE SURE IT IS A SAFE ENVIRONMENT FOR THE PET. DO YOU AGREE TO ALLOW ONE OF THE REPRESENTATIVES TO VISIT YOUR HOME? _____

DAY TO DAY CARE OF THE CAT

HOW MANY HOURS A DAY WILL THE CAT BE LEFT ALONE? _____

WILL THE CAT BE ALLOWED OUTSIDE? _____

ARE YOU AWARE THAT IT CAN SOMETIMES TAKE UP TO 2 OR 3 WEEKS TO ADJUST TO ITS NEW HOME? _____

ARE YOU WILLING TO ALLOW THIS MUCH TIME? _____

IF A BEHAVIORAL PROBLEM ARISES, WHAT STEPS WILL YOU TAKE TO WORK ON IT? _____

DO YOU HAVE PLANS TO DECLAW YOUR NEW CAT? _____ IF YES, WHY? _____

SOMETIMES THESE ANIMALS COME TO US FROM THE MOST HORRIBLE PLACES. THEY MAY BE SCARED AND ANXIOUS. ARE YOU WILLING TO HELP THIS ANIMAL ACCLIMATE TO FAMILY LIFE?

YOU WILL NOT HOLD HAPPY TAILS DOG RESCUE, INC. RESPONSIBLE IF THIS ANIMAL AND YOUR OWN ANIMALS HAVE A FIGHT.

YOUR SIGNATURE: _____ DATE: _____

THE NON- REFUNDABLE ADOPTION FEES FOR CATS AND KITTENS ARE AS FOLLOWS:

CATS/KITTENS	\$150
EXOTICS (I.E. PERSIANS, RAGDOLLS, SIAMESE)	\$200

THE ADOPTION FEE INCLUDES THE FOLLOWING: SPAY/NEUTER, VETTING (SHOTS AS AGE APPROPRIATE), FIV & FELINE LEUKEMIA TESTING (ALL CATS ARE NEGATIVE), MICROCHIPPING AND TRANSPORT. (IT DOES NOT INCLUDE PRE-SURGICAL BLOOD WORK FOR SPAY/NEUTER.)

PAYMENT SCHEDULE IS AS FOLLOWS:

INITIAL DEPOSIT - CATS - \$100 EXOTICS - \$150	DUE IN CASH WHEN YOU TAKE YOUR CAT HOME TO BEGIN FOSTERING WITH INTENT TO ADOPT.
BALANCE OF ADOPTION FEE	DUE IN CASH OR CREDIT CARD ON THE DATE OF THE SPAY/NEUTER PROCEDURE OR AFTER THE ONE WEEK TRIAL PERIOD (IN CASES WHERE ANIMAL BEING FOSTERED WITH INTENT TO ADOPT IS ALREADY SPAYED/NEUTERED.)

ALL FAMILIES THAT "FOSTER WITH THE INTENT TO ADOPT" HAVE ONE WEEK FROM THE DATE THEY TAKE THE CAT/KITTEN HOME TO DETERMINE IF IT IS A GOOD FIT FOR THE FAMILY. IF YOU DECIDE AFTER **ONE WEEK** THAT IT IS NOT A GOOD FIT FOR YOU, YOUR DEPOSIT WILL BE REFUNDED TO YOU UPON RETURNING THE CAT/KITTEN TO HAPPY TAILS DOG RESCUE ON THE DATE SPECIFIED AT A LOCATION TO BE DETERMINED BY THE RESCUE.

IN THE EVENT THAT THE BALANCE OF THE ADOPTION FEE IS NOT PAID ON THE DATE OF THE SPAY/NEUTER PROCEDURE, THE PROCEDURE WILL BE RESCHEDULED FOR A DATE NOT LATER THAN TWO (2) WEEKS FOLLOWING THE SCHEDULED DATE (SUBJECT TO THE AVAILABILITY OF THE VET). SHOULD YOU FAIL TO KEEP THE RESCHEDULED SPAY/NEUTER APPOINTMENT, HAPPY TAILS DOG RESCUE RESERVES THE RIGHT TO TAKE POSSESSION OF THE CAT, AT WHICH TIME THE INITIAL DEPOSIT OF THE ADOPTION FEE WILL NOT BE REFUNDED.

IN THE EVENT HAPPY TAILS DOG RESCUE INCURS ANY COSTS OR EXPENSES IN CONNECTION WITH SECURING PAYMENT FROM YOU OF THE ADOPTION FEES SET FORTH ABOVE, YOU AGREE TO PAY ALL REASONABLE ATTORNEYS' FEES AND COLLECTION COSTS.

YOUR SIGNATURE: _____ DATE: _____

FOSTER WITH INTENT TO ADOPT POLICIES:

I, _____ (PRINT NAME) HEREBY ACKNOWLEDGE THE FOLLOWING POLICIES AND AGREE TO ABIDE BY THEM DURING THE TIME THAT I AM FOSTERING THIS ANIMAL WITH THE INTENT OF ADOPTING IT FROM HAPPY TAILS DOG RESCUE, INC. (HTDR) -- (PLEASE WRITE YOUR INITIALS ON EACH POLICY LINE BELOW)

_____ I UNDERSTAND AND AGREE TO BRING THE ANIMAL FOR ANY ADDITIONAL CORE VACCINATIONS NEEDED WHILE I AM FOSTERING WITH INTENT TO ADOPT WITHIN THE SPECIFIED TIME FRAME AND UNDERSTAND THAT MY FAILURE TO DO SO IS CONSIDERED A FORM OF *NEGLECT AS IT ENDANGERS THE HEALTH OF THE ANIMAL*.

_____ I UNDERSTAND THAT AN APPOINTMENT TO HAVE MY KITTEN SPAYED/NEUTERED WILL BE SCHEDULED WHEN IT REACHES APPROXIMATELY 16 WEEKS OF AGE, UNLESS THERE IS A MEDICAL CONDITION PRESENT WHICH WOULD PREVENT THE PROCEDURE FROM BEING DONE. I AGREE TO BRING THE ANIMAL TO BE SPAYED/NEUTERED WHEN CONTACTED AND SCHEDULE THE APPOINTMENT WITHIN THE TIME FRAME GIVEN AND TO KEEP THE APPOINTMENT AS SCHEDULED.

_____ I UNDERSTAND THAT THE RESCUE PROVIDES ONE DOSE OF HEARTWORM PREVENTATIVE AND FLEA AND TICK PREVENTATIVE WHILE I AM FOSTERING WITH INTENT TO ADOPT. I UNDERSTAND THAT I AM RESPONSIBLE FOR PROVIDING ALL OTHER HEARTWORM AND FLEA AND TICK PREVENTATIVE.

_____ I UNDERSTAND AND AGREE THAT I AM PERSONALLY RESPONSIBLE FOR ANY/ALL FINANCIAL EXPENSES THAT I INCUR IN MY EFFORTS TO FOSTER WITH INTENT TO ADOPT. I UNDERSTAND THAT ANY VITAMINS, TOYS, CLOTHES ARE NOT COVERED BY THE RESCUE.

_____ I UNDERSTAND THAT SHOULD THE ANIMAL BECOME ILL (THAT HTDR WILL BE RESPONSIBLE FOR VETTING. HOWEVER, IF THE ANIMAL BECOMES INJURED IN MY HOME, IT WILL BE MY RESPONSIBILITY TO PAY THE VETTING COSTS FOR THIS ANIMAL.

_____ I UNDERSTAND THAT THE BALANCE OF THE ADOPTION FEE IS REQUIRED TO BE PAID ON THE DAY OF SPAY/NEUTER OR AT THE END OF THE ONE WEEK TRIAL PERIOD (IF ANIMAL BEING FOSTERED WITH INTENT TO ADOPT IS ALREADY SPAYED/NEUTERED). I WILL NOT ASK THE RESCUE FOR A PAYMENT PLAN, OR EXPECT A DEDUCTION BECAUSE I DO NOT HAVE THE MONEY TO PAY FOR THE CAT. THE ADOPTION FEE IS NON-NEGOTIABLE AND NON-REFUNDABLE. I UNDERSTAND AND AGREE THAT HTDR IS ENTITLED TO THE RIGHTS AND REMEDIES LISTED IN THE "PAYMENT SCHEDULE" SECTION OF THE FOSTER WITH INTENT TO ADOPT APPLICATION.

_____ I UNDERSTAND THAT HTDR CANNOT GUARANTEE OR BE HELD RESPONSIBLE FOR THE TEMPERAMENT, BEHAVIOR OR HEALTH OF ANY ANIMAL THAT I FOSTER WITH INTENT TO ADOPT. I AM AWARE THAT THESE ANIMALS MAY CAUSE DAMAGE TO MY PERSONAL PROPERTY, OTHER PETS AND PEOPLE. I AGREE TO THE SOLE RESPONSIBILITY FOR THESE OCCURRENCES. I WILL KEEP ANIMAL(S) SECURELY CONTAINED AT ALL TIMES WHILST IN MY CARE.

_____ I UNDERSTAND THAT IT IS MY DECISION TO FOSTER WITH INTENT TO ADOPT THIS ANIMAL FOR HTDR. I WILL NOT HOLD HTDR LIABLE FOR ANY DAMAGE, INJURY OR HARM, CAUSED DIRECTLY OR INDIRECTLY THROUGH MY ACTIVITIES WITH HTDR. **I CARRY LIABILITY INSURANCE COVERAGE IN THE EVENT OF PERSONAL INJURY OR OTHER DAMAGES RESULTING FROM THIS AGREEMENT.**

_____ I UNDERSTAND THAT I AM RESPONSIBLE FOR THE WELL BEING OF THIS ANIMAL DURING THE TIME I AM FOSTERING WITH INTENT TO ADOPT. SHOULD THE ANIMAL RUN AWAY, GET LOST, HAVE A HEALTH ISSUE DUE TO NEGLIGENCE DURING THIS TIME, ETC., I WILL BE RESPONSIBLE FOR THE ENTIRE ADOPTION FEE AND ANY ADDITIONAL EXPENSES THE RESCUE MAY INCUR, (I.E. ANY NEEDED VETERINARY CARE AS A RESULT).

_____ I UNDERSTAND THAT THE MAJORITY OF ANIMAL FIGHTS HAPPEN BECAUSE BOTH ANIMALS WANT THE SAME THING - THE ATTENTION FROM THE FOSTER/ADOPTER. I WILL PAY AS MUCH ATTENTION TO MY OWN ANIMALS AS I DO TO THE FOSTERED ANIMAL. I UNDERSTAND THAT MY OWN ANIMALS AND THE FOSTERED ANIMAL WILL BECOME TERRITORIAL OVER THINGS LIKE TOYS, TREATS, AND BEDS. TO AVOID ANY POTENTIAL TERRITORIAL CONFLICTS, I AGREE TO MAKE SURE THAT THESE ITEMS ARE NOT "LAYING AROUND".

FOSTER SIGNATURE: _____ DATE _____

APPLICANT'S DRIVER'S LICENSE # _____ STATE _____ EXP. DATE _____