

Companion Foster/Adoption Application

Tracey's Hope Hospice Care Program AND Rescue for Domestic Animals, Inc.

To ensure the safety and the best interest of the animals we have taken into our care, we ask that everyone who is interested in becoming a foster parent or adopting an animal from this rescue fill out this application form. Please be aware that in doing so you are giving the volunteers of this organization the right to check your references by telephone and to come to your residence for home visits. If you have any questions about our procedure or in completing this application, help is available by contacting this organization at (570) 457-1625

Name of Animal _____

Circle one: DOG CAT OTHER

We are glad if you have considered adopting a companion animal from us. The adoption of a lifelong friend should not be impulsive, but rather carefully decided, which will ensure a loving and lasting relationship. Please provide us with the following information:

First Name _____ Last Name _____

Address _____

City _____

State _____ Zip _____ Email Address _____

Telephone Info: (Home) _____

(Work) _____

(Cell) _____

Please provide us 4 Personal References (non-relatives - employers are acceptable)

Reference # One:

Name _____

Phone _____

Length of time you know this person _____

~~~~~

**Reference # Two:**

**Name** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Length of time you know this person** \_\_\_\_\_

~~~~~

Reference # Three:

Name _____

Phone _____

Length of time you know this person _____

~~~~~

**Reference # Four:**

**Name** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Length of time you know this person** \_\_\_\_\_

~~~~~

How many people reside in your household? _____

Do ALL Members of your family want a PET _____

Does any of the people living in your household suffer from allergies? _____

How many children live with you? _____ **Please list their names and ages:**

What other types of PETS live in your household? Please give the numbers of each: DOGS _____ CATS _____

BIRDS _____ RABBITS _____ OTHER _____

If "OTHER" please specify: _____

PET # 1 :

PET # 2 :

PET # 3 :

PET # 4 :

PET # 5 :

Name of your Veterinarian/Clinic (if you don't presently have one please list the one you have used in the past)

Veterinarian's Phone # _____

How long have you been with this Vet? _____

Have you ever had to give a pet up? _____

What happened to the last pet that you owned? _____

Do you own your own home? _____

If "NO" please list the name and telephone number of your landlord:

Is your yard completely fenced in? _____

If so, what type of fence and how high is it? _____

Do you have a outdoor pen or kennel? _____

If so, what are the dimensions

Is it covered? _____ If so, with what? _____

How long are your pets left alone on a normal day? _____

Weekdays? _____ Weekends? _____

Do you have a Pet sitter and/or boarding kennel? _____

If so, Please list their name _____

Where will you pet be kept at night? _____

Are you willing to work with this pet should a behavior problem arise? _____

Are you willing to use a crate for your new pet? _____

Have you ever used behavior training with any of your pets? _____

If so, please list their name

Are you willing to use monthly heartworm preventative medicine for your pet? _____

Will you keep your pet up-to-date on all required immunizations?

Remembering that Pets are an investment of your time and money can you afford to provide medical care, grooming, proper diet, proper shelter, proper vet care, and exercise for your new pet?

What provisions will be made for the Pet should you become ill or can no longer afford or care for this pet? _____

Do you agree to return the Pet to this rescue ONLY should you find that you cannot keep this pet and no provisions can be made for the safekeeping of this pet? (Please Initial) _____

Do you agree to make Tracey's Hope aware if this pet dies or is lost? _____ (Tracey's Hope has a Missing pet service should you need help finding your lost pet 570-457-1625)

I understand that this document is a legal binding contract signed by you, the applicant. And by my signing below, I understand that this document is NOT in itself an agreement to Adopt an animal but only a preliminary step in the desire to do so or an agreement to provide a foster home for this animal. When the animal is delivered to the you, the applicant, and placed under your care permanently with the Adoption CONTRACT signed, the adoption will have taken place. I understand that THIS document is NOT the final Adoption Contract. I further understand that by adopting or fostering a pet from this organization, NO GUARANTEES will be made to the future character development of the said pet. I will therefore hold harmless "Tracey's Hope Hospice Care Program and Rescue for Domestic Animals, Inc." and its volunteers for any and all behavior problems up to and including: destructive behavior, separation anxiety disorder, and aggression problems that may be present or develop post adoption. I further understand that follow-up home visits are a part of this adoption agreement. And if at ANY time, one of our adopted or fostered animals is found to be chained outside, abused, or neglected, and agent of this organization does retain the right

to remove the animal. I attest to the terms and conditions of adoption stated in this adoption application have been read by the myself, the undersigned, and further understand that this is part of the adoption process and will be strictly enforced. I attest also that the information provided on this application is true and accurate to the best of my knowledge. Any and all false information given will warrant this application Not Valid and Not Accepted by this organization. By my signing below, I agree to ALL of the above. I further understand that if this application is being completed via email, that my email address will suffice as my signature.

Applicant Signature _____

Today's Date _____

~~~~~

**FOR RESCUE USE ONLY:**

**Phone Interview: \_\_\_\_\_ Vet Check \_\_\_\_\_**

**Landlord Check if needed \_\_\_\_\_**

**Home visit \_\_\_\_\_**

**Approved by: \_\_\_\_\_**

**NOTES:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_