

APPLICATION TO FOSTER

NorCal Bernese Mountain Dog Rescue
220 Foster Ln. Dixon, CA 95620



NorCal Bernese
Mountain Dog Rescue



Date _____ Day _____ Month _____ Year _____

Chairman / Managing Director _____

PERSONAL INFORMATION

Name: _____

Present Address (Residence) _____

City _____ State, Zip _____

Phone 1 _____ Phone 2 _____

E-mail _____

PET OWNING EXPERIENCE

1. What kinds of pets are living in your home now?

Species/Breed _____ Male Neutered Female Spayed

Species/Breed _____ Male Neutered Female Spayed

Species/Breed _____ Male Neutered Female Spayed

Describe Temperament:

2. Are they tolerant of other pets? Yes No Please explain.

3. What kind of pets have you owned in the past and for how long?

4. Do you have a separate area or room in your house where you can contain a pet(s) while it is in foster care with you? Yes No

5. Please describe any experience you have had with pet training / obedience / medical care / births.

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YOUR FAMILY

1. Is everyone in your family comfortable with the idea of providing foster care? Yes No
2. Do you own or rent your home? Own Rent
If rent, landlord's name and phone: _____
3. Is there anyone in your household who is allergic to animals? Yes No
4. Are there children in your home? Yes No If yes, what are their ages? _____
5. Do your children have any experience with animals? Yes No
6. What kind of contact will your children have with a foster pet? _____
7. How many adults are in your household? _____
8. What are the daily work schedules of the adults in the household? _____
9. While you are at work, will members of your household be interacting with a foster pet? Yes No
If yes, what are their ages? _____
10. Who will be the main caretaker while the foster pet is in your care? _____

GENERAL QUESTIONS

1. Are you willing to take pets back and forth to our approved vets in your own vehicle? Yes No
2. Are you comfortable with your home being inspected prior to fostering? Yes No
3. Different pets need to be in foster care for different lengths of time. What length of time would you feel comfortable keeping a foster pet in your home? _____
4. We ask that you leave it up to us to place the foster pet(s) in appropriate homes. We really appreciate all the time and effort you've put into helping our animals, but we have an extensive screening process, which ensures just the right match. Realizing that this is a temporary arrangement, are you certain that you will be able to remain emotionally separated and able to part with foster pets when the time comes? Yes No
5. Are you prepared to deal with a pet that might become ill and ultimately die? Yes No
6. What type of pets are you able to help care for?
Recently spayed or neutered dogs Dog/Puppy recovering from surgery
Dog/puppy needing medical attention Dog/Puppy Socializing

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REFERENCES

Please provide names, addresses, and phone numbers for the following:

1. Friend or neighbor who can confirm your experience with animals:

Name: _____ Address: _____

Phone: _____

2. Your veterinarian:

Name: _____ Address: _____

Phone: _____

The undersigned (hereinafter "Foster Caregiver") agrees as follows: Foster care refers to a pet (or pets) being placed in a foster home for the purpose of providing specialized treatment for a designated amount of time. Pet(s) may be placed in foster care for a variety of reasons, such as being pregnant, too young for adoption, in need of special feeding or care, recuperating from surgery, being treated for disease (including contagious disease), and needing socialization or training. Although NorCal Bernese Mountain Dog Rescue will explain what it knows about the pet's (or pets') behavior, medical history, and needs to the Foster Caregiver, such information may be out-of-date, erroneous, or incomplete. NorCal Bernese Mountain Dog Rescue makes no warranties or claims as to the health, temperament or disposition of the pet(s). The Foster Caregiver shall care for the pet(s) in the most responsible manner, providing proper shelter. The Foster Caregiver shall restrain the pet(s) appropriately at all times. Bernese Mountain Dog Rescue will be responsible for medical care, and the Foster Caregiver shall follow NorCal Bernese

Mountain Dog Rescue's feeding and medical care instructions, which may require taking the pet(s) to a veterinarian if requested and authorized by Norcal Bernese Mountain Dog Rescue. When dogs are allowed outside, they must be on a leash (no retractable leashes please) or in a fenced yard. The Foster Caregiver takes full responsibility for all foster pets and their actions while in his/her care. NorCal Bernese Mountain Dog Rescue (including its employees and volunteers) shall not be held responsible for any damage or injury to any person or property caused by any pet(s) while in foster care. Norcal Bernese Mountain Dog Rescue legally owns the pet(s) placed in foster care. Ownership is transferred only when an adopter and Norcal Bernese Mountain Dog Rescue sign an adoption agreement, and the adopter pays the adoption fee to Norcal Bernese Mountain Dog Rescue. Norcal Bernese Mountain Dog Rescue reserves the right to have the pet(s) returned at any time. Norcal Bernese Mountain Dog Rescue also reserves the right to refuse any adoption.

By signing below, the Foster Caregiver acknowledges that he/she has reviewed this Foster Caregiver Release Form, understand it, and accept its terms.

Name _____

Signature _____ Date _____

You may either send this form by US Postal mail **or** email the completed PDF adoption application to:

NorCal Bernese Mountain Dog Rescue **or** rescue@bmdrescueca.org
220 Foster Ln., Dixon, CA 95620