



Foster Volunteer Application

- Humane Society of Berks County Humane League of Lancaster County

Today's Date: _____

First and Last name: _____ Date of Birth: _____

Street Address: _____

City, State, Zip Code: _____

Phone Number: _____

Email Address: _____

Best way to reach you? _____

Please tell us about your household:

Do you live in a(n): Apartment _____ Do you: Rent _____
Mobile Home _____ Own _____
Condo _____
House _____

How many adults are in your household? _____

How many children? _____ Children's ages: _____

What types and how many pets currently live in your household? _____

Who is your veterinarian? _____

Are all your pets currently vaccinated? Yes _____ No _____

Are all your pets spayed or neutered? Yes _____ No _____

If No, why? _____



Please indicate the kinds of animals you are interested in fostering: (Check all that apply):

Cats	Dogs	Others
Adult Cats _____ Litters of Kittens _____ How many kittens could you take at one time? 1 - 3 _____ 3 - 6 _____ 6+ _____ Nursing mom plus kittens _____	Adult Dogs _____ Small: _____ Med: _____ Lrg: _____ Puppies _____ Nursing mom plus puppies _____ Are there any breeds of dogs you are not comfortable fostering: _____ _____	Small Mammals: _____ Reptiles: _____ Birds: _____

Please describe your level of experience with animals: _____

Have you had prior experience with giving animals medication: _____

Have you had prior experience with training dogs: _____

Where will the foster animal be kept during the day? _____

Do you have an indoor area to confine or isolate the animal if needed? _____ Yes _____ No

If yes, please describe the area: _____



Where will the foster animal be kept during the night? _____

You may be required to bring your foster animal into the shelter as frequently as once/week to see our veterinarian, receive vaccinations, etc. Depending on the foster animals need, you may be required to bring the foster animal in during the week, Monday- Friday, between the hours of 12 PM- 3 PM.

Do you, or someone you know, have the ability to bring the animal in during this time?
_____ Yes _____ No

Humane Pennsylvania offers a program for families called Safe Haven. Safe Haven is foster housing for pets, when families have an emergency (house fire, a personal catastrophe, domestic violence, etc). The program allows the animal to stay in our care up to 30 days but can extend longer.

Would you be interested in becoming a Safe Haven foster? _____ Yes _____ No

Foster Care Agreement

Foster Parent's Commitment to Humane Pennsylvania:

- I certify that my own pets are currently up to date on their vaccinations, including rabies.
- I understand that Humane Pennsylvania strongly recommends that I keep my pet(s) separated from the foster animal(s) for at least ten (10) days. If the foster animal(s) is/are incubating any disease, this will minimize the chance of my own animals becoming ill. I understand Humane Pennsylvania is not responsible for the medical well-being of myself, others in my home, or my pet(s) and any illness or medical issues that occurs is my responsibility.
- When actively fostering for Humane Pennsylvania, I agree to restrict my fostering to said organization only so as to prevent disease transfer between animal populations unless other arrangements have been discussed and agreed upon with the Lifesaving Programs Coordinator.
- I agree to keep the foster animal(s) indoors unless under my direct supervision. Dogs must be on a leash when outside or securely contained within a fenced yard. Foster dogs are not permitted to be taken to dog parks. Foster cats are to remain indoors at all times.



- In the event of an emergency, I agree to contact the Lifesaving Programs Coordinator. If I choose to seek veterinary care outside of Humane Pennsylvania without prior approval from the Lifesaving Programs Coordinator, Humane Pennsylvania will not be responsible for any monetary reimbursement.
- Foster animals may be destructive, whether due to normal play and development (i.e. kittens and puppies), or due to behavior issues. I understand that Humane Pennsylvania is not responsible for any property damage that may occur as a result.
- Some foster animals may develop serious medical problems that may impact their quality of life. Sometimes, despite all efforts, a decision must be made to humanely euthanize an animal to alleviate suffering and/or protect the community in the event of aggression. I agree to follow any decision made by the Lifesaving Programs Coordinator regarding the return and/or disposition of the foster animals.
- I agree to return all e-mail and phone correspondence from Humane Pennsylvania Staff within 24 hours to facilitate prompt communication and care for my foster animals.
- Foster animals are the sole property of Humane Pennsylvania and will not be adopted or given to anyone without the permission of Humane Pennsylvania. I agree to return the foster animal(s) to Humane Pennsylvania as instructed to do so.

Humane Pennsylvania Commitment to Foster Parents:

- Humane Pennsylvania will provide all needed supplies to care for the animal.
- All animals will be up to date on vaccinations (as appropriate for their age, weight and medical condition) prior to being placed in a foster home. Felines will be tested for FIV/FLV.
- Humane Pennsylvania will provide all necessary medical care for the foster animals as directed by the shelter veterinarian.
- Humane Pennsylvania will return all e-mail and phone correspondence from the foster parent within 24 hours to facilitate prompt communication and care for the foster animals.

I confirm that all information supplied on this profile is true and correct. I also understand that foster training will be provided for me before I am able to begin fostering animals for Humane Pennsylvania.

Signed _____ Date _____



Please send application to:

Attn: Tawny Kissinger
Lifesaving Programs Coordinator
Tkissinger.humanepa@gmail.com

Humane League of Lancaster County
2195 Lincoln Hwy E
Lancaster, PA 17602
717-393-6551 ext. 240

Humane Society of Berks County
1801 N. 11th St
Reading, PA 19604
610-921-2348 ext. 218

PCode: _____ Initial Contact: _____ Foster Manuel Received: _____

Orientation Completed (Date and Initial) _____

Additional Notes: _____
