



# FOSTER APPLICATION

Cherokee Humane Society  
5900 Bells Ferry Rd.  
Acworth, GA 30102  
[www.cchumanesociety.org](http://www.cchumanesociety.org)  
678-735-2349 – Ann, please  
TXT

### Foster's Information

Name:		DOB:	
Street Address:			
City, State, Zip:			
Driver's License:		State:	
E-mail:			
Phone:	(H) _____	(C) _____	(W) _____
Person to contact in case of emergency			
Name:		Phone:	

### Living Arrangements

<input type="checkbox"/> Own Home <input type="checkbox"/> Own Apartment <input type="checkbox"/> Rent Home <input type="checkbox"/> Rent Apartment <input type="checkbox"/> Other:		
If renting, landlord's name & phone:		
Do you have a fenced in yard: <input type="checkbox"/> Yes <input type="checkbox"/> No    Type of fence:		
Are there any slats/openings that could allow a small dog to get in/out: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Please list all persons living with you: (If none, write n/a)		
Name:	Age:	Relationship:
Is everyone in your home aware that you have applied to foster? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is everyone agreeable to having a foster at home? <input type="checkbox"/> Yes <input type="checkbox"/> No    If no, please explain:		

**Animal Care**

Please list all animals living with you: (If none, write n/a)			
Name:	Age:	Breed:	Date of last vaccination:
Name:	Age:	Breed:	Date of last vaccination:
Name:	Age:	Breed:	Date of last vaccination:
Veterinarian Name and Phone:			
<p>Hours per day that foster(s) will be left alone:</p> <p>During the week:    <input type="checkbox"/> less than 4 hours    <input type="checkbox"/> 4-8 hours    <input type="checkbox"/> 8-10 hours    <input type="checkbox"/> more than 10 hours</p> <p>During the weekend:    <input type="checkbox"/> less than 4 hours    <input type="checkbox"/> 4-8 hours    <input type="checkbox"/> 8-10 hours    <input type="checkbox"/> more than 10 hours</p> <p>While left alone, foster(s) will be:</p> <p><input type="checkbox"/> individual crate    <input type="checkbox"/> shared crate    <input type="checkbox"/> in a restricted area of home    <input type="checkbox"/> free to roam entire house</p> <p><input type="checkbox"/> other (please explain):</p> <p>Do you understand that some times a complete history and temperament of a rescue dog/cat may not be known:</p> <p><input type="checkbox"/> yes    <input type="checkbox"/> no    <input type="checkbox"/> I only want to foster a dog/cat with a known history</p> <p>Are you willing to work with us to correct any possible behavior problem:</p> <p><input type="checkbox"/> yes    <input type="checkbox"/> no    <input type="checkbox"/> I only want to foster a dog/cat with no problems</p> <p>Are you able to transport foster dog/cat to vet and adoption events:    <input type="checkbox"/> yes    <input type="checkbox"/> no</p> <p>Do you have any concerns about fostering? If so, please explain:</p> <p>By submitting this application, I affirm that the facts set forth in it are true and complete to the best of my knowledge. I understand that if I am accepted as a foster, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. Cherokee Humane Society shall be held harmless from and against any and all claims and damages of every kind, for injury to any person or persons and for damage to or loss of property, arising out of or attributed to, directly or indirectly, the operations or performance of the above named volunteer under this agreement, including claims and damages arising in whole or part from the negligence of CHS. I agree to notify a CHS Lead of any injuries such as illness, escapes, injuries or any concerns pertaining to my foster as soon as possible.</p>			
Potential Foster Signature:			Date
Processors Signature:			

This organization provides equal opportunities without regard to race, color, religion, national origin, gender, sexual orientation, age or disability. Thank you for your interest in volunteering with us.



# Georgia Department of Agriculture Foster Home Agreement

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- 1.The Cherokee Humane Society (CHS) agrees to allow \_\_\_\_\_, To act as foster home under animal shelter license number 33103032 issued by the Georgia Department of Agriculture.
- 2.All animals remain the property of CCHS, and as such, must be returned to CCHS upon request.
- 3.NO animal will be removed from or returned to the animal shelter without authorization.
- 4.Foster home will not accept any stray or abandoned animals without authorization from CCHS.
- 5.Foster home agrees to initial and periodic inspections by CCHS personnel and the Department of Agriculture.
- 6.CHS will furnish a copy of their current license for display at the foster home.
- 7.CHS will furnish healthy animals for fostering to include current rabies vaccination if required. This does not prohibit the fostering of an animal for rehabilitation purposes.
- 8.Foster home premise and all enclosures must be kept in good state of repair at all times.
- 9.Each building housing animals will have a fully functioning fire or smoke detector.
- 10.All enclosures will be cleaned daily and as often as needed during the day to prevent odors.
- 11.All enclosures will be disinfected weekly and as often as needed to prevent disease.
- 12.Temperature in indoor housing areas should be maintained between 50° – 85° F.
- 13.Housing areas should be well ventilated to provide fresh air and to minimize odors and moisture.
- 14.Adult Dogs should be fed \_\_\_\_ times daily of free choice; puppies \_\_\_\_ times daily; cats/kittens \_\_\_\_ times daily or free choice.
- 15.All animals must have fresh water daily and be checked during the day.
- 16.Medical treatment must be provided when needed and approved by a member of CHS staff prior to going to vet.
- 17.Foster animals being housed outdoors are required to have appropriate shelter and adequate enclosures.
- 18.No foster animal will be held by means of tethering.

If at any time it is determined that foster home is in violation of this agreement or any other agreement with CHS, foster home agrees to immediately relinquish animal at request of CHS.

Potential Foster Signature:	Date
Processors Signature:	



# Cherokee Humane Society Foster Rescue Commitment

## HOLD HARMLESS AND SUPPLEMENTAL FOSTER HOME AGREEMENT

- 1.) I understand that Cherokee Humane Society (CHS) is a non-profit organization devoted to rescuing and placing animals in need. Because of my intention to aid CHS in its charitable pursuits. I agree to hold CHS and / or representatives thereof, free and harmless from any loss, damages, injury or death to any person, animal or property caused by the CHS affiliated animal(s) placed in my custody.
- 2.) I am aware that CHS affiliated animal(s) may have undetectable illnesses. Further, I realize CHS is responsible only for the medical care of its CHS affiliated animals. I agree that I, alone, am responsible for any actions taken by the CHS affiliated animal(s) once placed in my custody and under my care. I am aware that to be eligible for reimbursement, all vet visits must be pre-approved by foster representative. Emergencies **may** be considered exceptions.
- 3.) I understand that the veterinarian, CHS, or representatives thereof, take no responsibility as to the character or disposition of the CHS affiliated animal(s) in my custody.
- 4.) Should the CHS affiliated foster animal become lost, stolen, seriously ill, or die and / or bite in an aggressive manner, I will contact the CHS Foster Lead immediately. "Contact" shall mean verbal communication by either telephone or in person between me and the CHS Foster Lead..
- 5.) The foster animal shall wear an ID tag at all times. (dogs)
- 6.) I understand that should I decide to permanently adopt a CHS affiliated foster animal(s) in my care, that I will pay Cherokee Humane Society (CHS) the adoption fee.
- 7.) I understand that foster animals must attend to (2) adoptions per month. Exceptions to this requirement would be sickness, animals too young, or animals working out specific behavior issues.
- 8.) I understand that I am fostering the animal for CHS, and although in my care, the animal is under the CHS license and is owned by CHS. I also understand that the foster animal must remain in my care and control at all time with the obvious exceptions of pet adoptions, vet visits, and grooming.
- 9.) I understand that foster animals cannot be released to another party without legally binding adoption donation, or and approved transfer to another foster or rescue individual. "Trial Adoptions" are not allowed under most circumstances but if you feel like it would be beneficial in placing the animal you must have approval from CHS Representative, and all foster homes must be home-visited and approved in advance, as well as specific animal home placements.

### CERTIFICATION

By signature below, I certify that I am at least 21 years of age and assume full responsibility for the care and well-being of any animal(s) that I provide foster care to on behalf of CCHS. Any misrepresentation of the true facts will invalidate my foster home agreement with CCHS and will give CCHS the right to immediately reclaim any and all CCHS animals in my care.

Signed this \_\_\_\_ day of \_\_\_\_, 20\_\_ by;

Potential Foster Print Name:	Date
Potential Foster Signature:	
Processors Print Name:	Date
Processors Signature:	