

High Country Newfoundland Club Rescue Network



Foster Application

Thank you for your interest in providing a Foster Home for a Newfoundland dog from High Country Newfoundland Club Rescue Network. By completing and submitting this application you affirm that you accept full responsibility to provide temporary housing, food and both physical and mental care to a rescued Newf. Please answer all of the questions as completely and truthfully as you can to determine the most suitable rescue Newf for your situation, read the liability release and sign the completed application. Use additional pages as needed.

Date of Application _____

Personal Information:

Name _____

Street Address (No P.O. Boxes) _____

City _____ State _____ Zip _____

Home Phone (____) _____ Work Phone (____) _____ Cell Phone (____) _____

Are you able to accept text messages? Yes _____ No _____

Which phone is best to reach you? Home Work Cell

Best Days/Time to call _____

Occupation _____

Primary E-mail Address _____

Why do you want to become a Foster Home?

Have you or anyone in your family ever been convicted of an animal cruelty crime? Yes _____ No _____

Is everyone in your family agreeable to fostering a Newf? Yes _____ No _____

Do you have transportation and are you willing to transport a rescue dog for veterinary care? Yes _____ No _____

Who will be primarily responsible for the dog's care and training?

How many people are in your household? _____

Number of children and their ages: _____

Home:

Do you live in: City _____ Suburban _____ Semi-Rural _____ Rural _____

Is yours a(n): Single family home _____ Condo/Apartment _____

Do you Own? _____ Rent? _____ If Rent, will your landlord permit you to have a dog? Yes _____ No _____

Are there any covenants/restrictions on pets where you live? Yes _____ No _____

If Yes, explain: _____

Does fencing completely enclose the yard for a dog? Yes _____ No _____

If Yes, what type of fencing and how tall is it?

If No, explain how and where you will exercise a dog and allow it to relieve itself:

Lifestyle:

Is someone normally at home during the day? Yes _____ No _____

If No, how many hours will you be gone during a normal weekday? _____

Where will the dog spend the day?

Loose Indoors _____ Loose Outdoors _____ Crated Indoors _____ Basement _____ Garage _____

Kennel Run _____ Fenced Yard _____ Other _____

Do you travel overnight frequently? Yes _____ No _____ How often? _____

If Yes, who will take care of the dog while you're away?

Where will the dog sleep?

Pet History:

Do you currently own one or more dogs? Yes _____ No _____ If Yes, how many? _____

Please provide details below.

1) Dog's Gender? M ___ F ___ Spayed/Neutered? Yes ___ No ___ Breed _____ Age _____ How long owned? _____

2) Dog's Gender? M ___ F ___ Spayed/Neutered? Yes ___ No ___ Breed _____ Age _____ How long owned? _____

3) Dog's Gender? M ___ F ___ Spayed/Neutered? Yes ___ No ___ Breed _____ Age _____ How long owned? _____

Do you currently own one or more cats? Yes ___ No ___ If Yes, how many? _____

Do you have any other pets? Yes ___ No ___ If Yes, details _____

Can you and will you provide remedial obedience training? Yes ___ No ___

Preferences:

Do you have a preference regarding age or sex of a foster dog? Yes___ No___ If Yes, explain in detail:

Are you willing to foster a dog with special medical needs? Yes_____ No_____

Are you willing to foster an abused dog who needs extra love and attention? Yes _____ No_____

Are you willing to foster a dog with behavioral problems that require special attention? Yes_____ No_____

Additional Comments:

Please explain any limitations you have for Fostering and/or Transporting a Newf:

Foster Agreement

I am willing to accept the financial responsibilities (until reimbursed by HCNC) and other burdens and responsibilities associated with fostering a rescued Newfoundland. I also understand that a home evaluation is mandatory before final approval to foster will be granted.

Foster and Transport Liability Release

HCNC and others working for and/or associated with the Rescue shall not be responsible for any damage or injury caused by a Newfoundland fostered and/or transported through HCNC. This includes, but is not limited to, dog bites to persons or animals, or property damage.

Printed name of Applicant: _____

Signature of Applicant: _____

Please email completed form to:
hcncrecue@yahoo.com