## Virginia Beach Animal Control Foster Family Application & Information Sheet

Name:			Date:
Date of Birth:	Driver's License (	State & Nun	nber):
Street Address:			
City:	_ Zip:		Phone:
Alternate Phone:		E-mail:	
What is your preferred method of conta	ct: Phone	or	E-mail
Do you have other animals in your hom	e, either owned o	r fostered?	
How many dogs do you currently have	in your home?		Are they all sterilized?
How many cats do you currently have in your home?			Are they all sterilized?
Not including rabies vaccine, what othe	r vaccinations do	you provide	for your animals?
Are there children living in or visiting th	e house?	If ye	es, please list their ages:
Do you have a separate room or area v	here you could ke	eep foster ar	nimals isolated?
An annual home-visit is required of all f from VBAC staff?			to make your home available for a quick visi
Are you prepared to provide food, litter (Minor medical care will be provided by case-by-case basis with Supervisor app		foster anim eterinarian;	als? more extensive care will be handled on a
Have you ever been convicted of anima	l cruelty, neglect,	or abandonr	ment?
Please Print Full Name of Foster Care P	rovider		Signature of Foster Care Provider

## Animals of interest

Please check all that apply. Remember you can always say no to individual animals or litters. Felines: \_\_\_\_\_ Orphaned newborns needing bottle-feeding (1 day- 5 weeks) Nursing mother and kittens Kittens not requiring bottle-feedings (5 – 8 weeks) \_\_\_\_\_ Cats or kittens with a physical handicap \_\_\_\_\_ Cats or kittens requiring daily medication \_\_\_\_\_ Cats or kittens recovering from illness Cats or kittens recovering from injury or surgery \_\_\_\_\_ Cats or kittens needing socialization \_\_\_\_\_ Cats or kittens needing to be observed in a home setting to determine behavior and temperament Cats or kittens needing temporary housing due to owner's extended absence (deployment, homeless, women's shelter, etc.; these animals may need a month or more of foster care) Canines: Orphaned newborns needing bottle-feeding (1 day- 5 weeks) Nursing mother and kittens Puppies not requiring bottle-feedings (5 – 8 weeks) \_\_\_\_\_ Dogs or puppies with a physical handicap \_\_\_\_\_ Dogs or puppies requiring daily medication Dogs or puppies recovering from illness Dogs or puppies recovering from injury or surgery Dogs or puppies needing socialization Dogs or puppies needing to be observed in a home setting to determine behavior and temperament Dogs or puppies needing temporary housing due to owner's extended absence (deployment, homeless, women's shelter, etc.; these animals may need a month or more of foster care) Small Animals: (Usually for socialization, lack of space, or pregnancy/nursing) Rabbits \_\_\_\_\_ Hamsters/Gerbils/Mice \_\_\_\_\_ Rats \_\_\_\_ Guinea Pigs Small Birds (parakeets, cockatiels, finches)

Large Birds (parrots) Please describe your experience with birds and/or small animals: