

# Meeks Menagerie greyhound adoption and pet rescue Inc.

## Foster Carer Application Form - Cats

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### Applicant Details

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Phone Number Day: \_\_\_\_\_ Phone Number Evening: \_\_\_\_\_

Email: \_\_\_\_\_ Drivers Licence Number: \_\_\_\_\_

Address where the pet will be living: \_\_\_\_\_

\_\_\_\_\_

In some cases the responsibility of caring for pets is shared with another person within one household. If so, please include the name and contact details of this person:

### Living Arrangements

What type of dwelling with the foster kitten be living in? (tick) ☐ Apartment

☐ House

☐ Acreage

☐ Other

Are you presently employed?  
If yes, please advise your work schedule  
(full time, part time, casual):

Your position?

\_\_\_\_\_

Employers name and contact details:

Reference #1 Name:

Reference #2 Name:

Relationship:

Relationship:

Phone number:

Phone number:

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### Living Arrangements

*The following information will help us match a specific foster pet to your household and your lifestyle.*

Why are you interested in joining our foster program?: \_\_\_\_\_

\_\_\_\_\_

Describe any previous experience working with animals: \_\_\_\_\_

\_\_\_\_\_

Describe any present and previous volunteer jobs: \_\_\_\_\_

\_\_\_\_\_

Do you have any special training or skills? (eg vet nurse, behavioural trainer): \_\_\_\_\_

\_\_\_\_\_

Are you interested in fostering (tick one or more boxes as appropriate)

☐ Kitten(s)

☐ Mum and kittens

☐ Adult cat

☐ Senior cat

Would you consider fostering special needs cats? (tick one or more boxes as appropriate)

☐ Recuperating from illness or injury

☐ Requiring socialisation or behavioural help (eg shy or fearful)

☐ Pregnant

☐ Unweaned kittens

Do you have children (y/n): \_\_\_\_\_ If so, what are their ages? \_\_\_\_\_

\_\_\_\_\_

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### Experience

Do you presently have pets? (y/n): \_\_\_\_\_ If yes, how many and what kinds? \_\_\_\_\_

Are they desexed?: \_\_\_\_\_

Are your animals' vaccinations current?: \_\_\_\_\_

Please describe where in your home the foster cat will be cared for: \_\_\_\_\_

Will you isolate the foster cat from your own animals? (y/n): \_\_\_\_\_

If so, how will they be isolated? \_\_\_\_\_

Do you agree to keep your foster cat indoors at all times? (y/n): \_\_\_\_\_

*(Foster animals, particularly cats, will take time to establish themselves in a new home – any cat, whether adopted or fostered, that is allowed outdoors within two month's of being relocated to a new premises runs a very serious risk of becoming lost).*

On a typical day how many hours (on average) would the foster cat be home on their own?: \_\_\_\_\_

Who, if anyone, will assist you in caring for the foster cat?: \_\_\_\_\_

Would you be willing to allow pre-screened potential adopters visit the foster cat at your home if a prior appointment is made with you? (Yes/No): \_\_\_\_\_

Would you be willing to allow a rescue group representative to visit your home at a mutually agreed upon time? (Yes/No): \_\_\_\_\_

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### Experience

Would you be willing to allow a rescue group representative to visit your home at a mutually agreed upon time? (Yes/No): \_\_\_\_\_

Are you able to transport your foster cat to and from the shelter or veterinary clinic for assessments and veterinary checks? (Yes/No): \_\_\_\_\_

Please indicate which, if any, of the below you may be willing to provide for your foster cat. While we endeavour to support all our volunteer carers to the best of our ability, any assistance carers can in provide with respect to nutritional or veterinary care for foster animals is always greatly appreciated:

☐ food

☐ parasite prevention (eg worming tablets or flea prevention)

☐ litter & litter tray

Do you have any comments you wish to make?: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Declaration

By submitting this questionnaire, you agree that ALL the information you have provided is correct. You understand that providing untruthful answers or failure to comply with the requirements of this application can result in the refusal of this adoption.

By submitting this application, you agree to allow our representative to contact the referees/references you have provided. You understand that in some instances a property check will be required.

We reserve the right to refuse any applicant.

Signed (applicant): \_\_\_\_\_ Signed (rescue): \_\_\_\_\_

Print name: \_\_\_\_\_ Print name: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

*Thank you for taking the time to complete this questionnaire. You will be contacted once we have had the opportunity to review the information you have provided.*

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