

MONROE ANIMAL LEAGUE
P.O. Box 23, Stroudsburg, P.A. 18360, 570-476-8444
FOSTER APPLICATION

Please complete this application and mail to the address at the top of the page.

Name _____ Home Phone _____
 Address _____ Work Phone _____
 Town _____ State _____ Zip _____

How long have you been living at your present address? Years _____ Months _____

Are you living in a House Apartment
 Do you Own Rent Live with parents Have a roommate
 Landlord's name and phone # if renting _____

Do you have your landlord's permission to have a pet? Yes No Is this stated in your lease? _____

Do you have children? Yes No If yes, what are their ages? _____

Are there other adults in your household? Yes No If yes, how many? _____

Are you planning on moving in the near future? Yes No When? _____

Do you have experience in caring for a cat/dog? Yes No Which? _____

List all pets you have at this time or have had in the past.

Type of pet	Sex	Age	Spayed	Neutered	Indoor Pet	Outdoor Pet	From what year?	To what year?
1.								
2.								
3.								
4.								
5.								
6.								

Please list what happened and why to any pets you no longer have on the back of this application.

Do you have a regular veterinarian? Yes No

Vet's name and phone # _____

Will you foster a Cat Dog Either

Who will care for the foster animal? _____

Will the foster be alone for any period of time? Yes No How many hours? _____

Where will the animal sleep? _____

Where and how will it get exercise? _____

Do you know that foster cats must be kept indoors only? Yes No

Do you have any objections to submitting to a home check? Yes No

Have you ever fostered in the past? Yes No For whom? _____

List name, address, and phone number of 3 personal references.

1. _____
2. _____
3. _____

Do not write in this space.

Monroe Animal League Use Only

Landlord approval of applicant having a pet Yes No

Vet reference Yes No Name of vet _____

Home check info _____

Result of personal references Yes No Comments _____

Applicant approved Yes No

Authorized Approval Signature _____