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http://www.herduneededahome.com
501 (c)3 Nonprofit EIN 47-3527156

## FOSTER HOME APPLICATION

Thank you for your interest in fostering a herding dog with HUNAH. So that we may find the right dogs that fit your household, we ask that you answer the following questions as completely as possible. If a question is not applicable to your situation do not leave it blank—please indicated with N/A.

## APPLICANT'S INFORMATION Name: Physical Address: Mailing Address (if different from above): \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone(s) (check which is best): $\Box H()$ $\Box W()$ $\Box CELL()$ Email Address: Do you wish to foster: □On a mostly-regular basis? □Only occasionally? (*elaborate*) Do you travel often, have an upcoming/annual vacation, or have other periods of time that you will not be available to foster a dog? \( \subseteq \text{No} \subseteq \text{Yes} \( (elaborate) \) HOUSEHOLD Names, ages and relation of all adults in the household: Names, ages and relation of all children in the household: Other children that visit? Grandkids, Children you babysit Other (elaborate) Does anyone in the household have animal-related allergies? No Yes (elaborate) **DWELLING and HOME SETTING** □Own □Rent □Rural □Suburban □Urban Type of housing: □Single Family □Duplex □Mobile Home □Apt/Condo □Townhouse □Other (specify) \_\_\_\_\_ If rental, list landlord's name and phone number: How long have you resided at this address?\_\_\_\_\_ Do you have □Acreage? □Dog-proof Fenced Yard? Describe your dog facilities in detail including fence type and height, doggie doors, dog runs, dog houses, shelters, size of exercise area, where the foster dog will spend its days and nights, etc.: PRIMARY caretaker of the foster dog(s): $\Box Me \ \Box Other (specify)$ Names, breeds, and ages of domestic animals in the household:

Are all your pets spayed/neutered?   Yes  No (why not?)  Are all of your domestic animals up to date on their annual vaccines?  Yes  No (elaborate)		
DOG EXPERIENCE		
Have you ever fostered an animal with a municipal shelter or rescue group before? $\Box$ No $\Box$ Yes ( <i>elaborate</i> )		
Have you ever owned or cared for a herding dog?   No   Yes   Personal Dog   Family Dog   What breed(s)?		
What breed(s)?		
Have you ever: Crate-trained a dog? □Yes □No Leash-trained a dog? □Yes □No Describe your experience handling dogs (basic dog training, agility/trick training, vet tech, groomer, etc):		
How will you exercise the dog(s) in your care?		
How many hours per day will the foster dog be without human interaction/supervision?		
Preferences for foster dogs: $\Box$ no pref $\Box$ male $\Box$ female $\Box$ baby $\Box$ young $\Box$ adult $\Box$ mature $\Box$ BC $\Box$ Heeler		
$\Box$ Aussie $\Box$ Kelpie $\Box$ Corgi $\Box$ low energy $\Box$ high energy $\Box$ timid/shy $\Box$ brave/forward $\Box$ under 30 Lbs. $\Box$ any size Are you willing to cover the costs of caring for a foster dog (except for medical expenses)? $\Box$ Yes $\Box$ No Are you willing to transport dogs to facilitate adoptions $\Box$ No $\Box$ Yes $\Box$ Donly to HUNAH's vet partners $\Box$ under 25 mi. $\Box$ 25 $\Box$ 50 mi. $\Box$ 50 $\Box$ 100 mi. $\Box$ 100 $\Box$ 200 mi. $\Box$ all of Oregon $\Box$ anywhere in the Wes		
PERSONAL REFERENCES		
Please supply names and telephone numbers for 3 personal references (THEY MUST NOT BE: YOUR SPOUSE, RELATED TO YOU, YOUR VET). Also list a veterinarian reference (past or present). Please notify them all in advance that we will be calling soon.		
1. Reference Name:		
Relationship:		
Phone(s):		
2. Reference Name:		
Relationship:		
Phone(s):		
3. Reference Name:		
Relationship:		
Phone(s):		
Veterinarian Reference:		
Phone(s):		
ALL OF THE INFORMATION I HAVE PROVIDED ON THIS APPLICATION IS, TO THE BEST OF MY KNOWLEDGE, TRUE AND COMPLETE. I UNDERSTAND THAT FALSIFYING ANSWERS ON THE APPLICATION, OR AT ANY OTHER TIME DURING THE FOSTERING PROCESS, DISQUALIFIES ME FROM FOSTERING.		
Signature of applicant: Date:		

## HERD U NEEDED A HOME CANINE RESCUE FOSTER CARE AGREEMENT

I (print name)	understand that someone from Herd U
Needed A Home Canine Rescue (HUNAH) will visit my home to ver	
If the dog I foster is on medication and/or on restricted exercise I will directed. I will not let the dog outside, loose by itself, unless in a chawithin another HUNAH approved exercise area. Even so, I understart injury or escape, and I promise to check on and supervise off-leash proposed to 30 minutes. I understand that this off-leash protocol is crucial—depending on the temperament of the dog in question. (SOME DOGS FOR ANY REASON—your HUNAH representative will inform your	in-link dog kennel with sides at least 6-foot tall or ad that no outdoor dog exercise area is without risk of lay and exercise time for the dog(s) in my care every -especially during the first few days or weeks of care S MUST NEVER BE LET OUTSIDE OFF LEASH
If during the time I am fostering the animal it requires medical attent representative first—unless it is an emergency. If a HUNAH representatempt to take the dog under my care to one of HUNAH's approved animal clinic if unable to contact one of HUNAH's approved vet part property of HUNAH and I will not sell, trade or dispose of the animal animals being up-to-date on all standard vaccinations and will provide prior to accepting my first dog to foster and yearly thereafter as asked	tative is not available during an emergency I will vet partners first—then to the nearest emergency tners. I understand the foster dog under my care is the il. I understand the importance of my own domestic led HUNAH with a current shot record for each one
I understand that anyone interested in adopting my foster dog must be cannot adopt from HUNAH. A parent or legal guardian must become myself) must go through the standard adoption process. All application Ultimate approval of candidates and placement of dogs is up to a description.	the legal owner of the dog.) All applicants (including ons must be approved prior to any meet and greet.
I understand that although HUNAH takes reasonable care to screen derelating to any dog's health, behavior or actions. I understand that I reject or return any HUNAH dog(s) for any reason. In the event of a under my care until a new foster home may be arranged—up to and it personal telephone contact with a designated HUNAH representative due to the dog's illness, aggressive temperament, destructive behavior fostering it for any reason—I promise to take the dog to a bonafide me business hours, or turn it over to an official animal control officer in a contacted as soon as possible as to the location and condition of the designated hundal condition of the designation hundal condition of the designated hundal condition hundal condition of the de	eceive foster care dogs at my own risk and that I may return, I promise to continue to shelter the dog(s) including 48 hours of my initial request through it. If a dog must be returned in a shorter time frame for, etc.—or because I become incapable to continue nunicipal animal shelter in my immediate area during my jurisdiction, and explain that HUNAH must be
I acknowledge that I am a volunteer only—not a paid employee or consist capable of predictable and unpredictable behaviors including but not chewing, barking, tripping, shedding, urinating, defecating, vomiting injury and death to other animals and people. I indemnify and hold Hand fellow foster families free and harmless from all liability arising action, judgment of every kind and description which may occur to omy own animals or any third parties by reason of activities arising our responsibility for any diseases that may be contracted by my resident	ot restricted to herding, nipping, biting, scratching, sescaping, cat killing, dog killing, and serious bodily IUNAH, its Board of Directors, Executive Officers, out of any and all claims, demands, losses, damages, or be suffered by me, members of my household, at of this agreement. I release HUNAH from
Remarks or qualifiers to the above agreements:	
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Foster Applicant	Date

HUNAH Representative \_\_\_\_\_\_ Date \_\_\_\_\_