

City of Mission Viejo Animal Services Center Foster Home Application

Name (please print):					
Address	S: Street	Apt. #			
	Street	Apt. #			
	City	State Zip			
Home Phone:		Cell Phone:			
Email:					
			_		

Animal Care Agreement

I agree to give shelter and protection for all animals under my care and responsibility and to feed only the food provided by the Mission Viejo Animal Services Center. I also agree to keep all cats and kittens inside of my house at all times, and allow all puppies or dogs access only to my house and my secure yard. If said animal(s) requires medical attention, I will contact shelter staff prior to seeking veterinary care or treatment. I will not foster for any rescue groups or shelters other than The Mission Viejo Animal Services Center while involved in their foster program. I will not give away or adopt out any animal in my care, and I agree that I will return this animal to the Animal Services Center when directed to do so by staff. If I relocate or go on vacation, I will notify Mission Viejo Animal Services Center beforehand.

WAIVER, RELEASE, HOLD HARMLESS, AND AGREEMENT NOT TO SUE

I,_______(FULL NAME), fully understand that my participation in the Mission Viejo Animal Services Center Foster Care Program (hereinafter "Foster Care Program") exposes me to the risk of personal injury, death, and/or damage to or loss of property. I hereby acknowledge that I am voluntarily participating in the Foster Care Program and agree to assume any such risks.

I hereby release, discharge, and agree not to sue the City of Mission Viejo for any injury, death or damage to or loss of personal property arising out of, or in connection with, my participation in the Foster Care Program from whatever cause, including the active or passive negligence of the City of Mission Viejo or any other participants in the Foster Care Program. This document is not intended to release any party from any act or omission of "gross negligence," as that term is used in applicable case law and/ or statutory provision.

In consideration for being permitted to participate in the Foster Care Program, I hereby agree, for myself, my heirs, administrators, executors and assigns, that I shall indemnify, defend, and hold harmless the City of Mission Viejo and its officers, officials, employees, agents, and volunteers from any and all claims, demands, actions or suits arising out of or in connection with my participation in the Foster Care Program.

Date:		
	Signature:	
	Print Name:	

	Mission Vi	ejo Anima Foster Pro	al Services Center
Please answer all of t	he following questions		
Do you own or rent y	our home? 🗌 own 🗌] rent	
lf you rent, do	o you have your landlo	rd's permission to l	have a shelter animal at your home?
🗌 Yes 🗌 No			
May we conta	act your landlord if nec	essary? 🗌 Yes 🗌	No
Landlord Nam	ne:	Phone N	lumber:
Where will a fostered	animal be kept? Pleas	e be specific (room	n, area etc).
	an inspection of your p If yes, why?		Services Staff?
Do you have a fenced	yard? 🗌 Yes 🗌 No		
What type of enclosu	re is it and how high is	the enclosure?	
-			
What experience have	e you had in caring for	animals especially,	, newborn kittens and puppies?
Have you fostered an	y animals from us, any	other shelter or re	escue group in the past? If so when?
Do you currently fost	er for any other shelter	r, rescue group, or	organization?
🗌 Yes 🗌 No			
If Yes, name of	organization:		
Have you ever owned	animals? 🗌 Dog 🗌	Cat 🗌 Other	
What kind of b	reed?		
How many animals pr	esently live in your ho	me?	
Dog	Sex/Age	Cat	Sex/Age
Other pets			

Mission Viejo Animal Services Center

Foster Program

How many hours will a fostered animal be left alone while under your care?

Will you continue to foster animals if a medical condition arises during your foster period?

Do you fully understand and 100% agree that you cannot adopt fostered animals to friends, neighbors or family members? Yes No

ALL FOSTERED ANIMALS are the property of the Mission Viejo Animal Services Center and ALL FOSTERED ANIMALS must be returned for adoption at the appropriate time.

Check as many of the following that apply:

I can foster:

- Pregnant cat(s)
- Mom cat & kittens
- Kittens
- Kittens (bottlefed)
- Cat with medical condition
- Pregnant dog
- Mother dog & pups
- Puppies without mom
- Dog with medical condition

Where did you hear /see about our foster program?

Foster applications are reviewed as time permits. Our foster coordinator will contact you as soon as possible, to further discuss your application.

FOR OFFICE USE ONLY							
Received By:			Date:				
Applicants License number(s) and status:							
#	Status	#	Status				
#	Status	#	Status				
Comments:							