

Cowley County Humane Society Foster Family Information Sheet

Thank you for volunteering as a foster family for the Cowley County Humane Society. Please take a moment to answer the following questions, which will provide information that will help us place animals in appropriate homes.

Name:		Today's Date:	
Address, City, State, Zip:			
Phone:	Alternate Phor	ne:	
Prefer contact method and time:	Email:		
Are you currently fostering for another organization besides		Yes	No
Household Information:			
Number of adults in the household:	Ages: Female:		Males:
Number of children in the household:	Ages:		
Are there cats in the household?		Yes	🗌 No
If yes, how many?	_		
Are there dogs in the household?		Yes	No
If yes, how many?	Type: _		
Are they up to date on all their vaccines?		Yes	No
Please describe your household. For example: Is it quiet? Is	there a lot of ac	tivity? etc.:	

General Fostering Information:

Are you interest in fostering (check all that apply)?

- Pregnant Cats
-] Nursing Cats/Kittens
- Special Needs Cats
- Sick/Injured Cats
- Bottle-Feeding Orphaned Kittens

Pregnant Dogs

- Nursing Dogs/Puppies
- Special Needs Dogs
- Sick/Injured Dogs
- Bottle-Feeding Orphaned Puppies

Do you have experience bottle-feeding kittens/puppies?	Yes	No No
Are you interested in learning how to bottle-feed?	Yes	No
Please list previous experience with those areas you checked:		
Do you have experience socializing feral kittens?	Yes	🗌 No
If yes, please explain:		
If fostering a mother and babies or orphaned babies, how long are your Until 10 weeks old As long as needed	ou willing to do so	
Where will the $cat(s)/dog(s)$ be housed? (We generally recommend a den, laundry room or bathroom – especially for pregnant or nursing		uch as a spare bedroom,
How many hours a day can you spend with the cat(s)/dog(s)?		
Are you willing to (please check all that apply)?		
Transport the animals to our vet, located at CCHS as need	led?	
Allow adoptive families to visit your home or bring the an	nimals for possible	adoption?
Take pictures and have those readily available to our web	site coordinator?	
Write a description about each cat/kitten and/or dog/pupp	y(s)?	
Give medication(s) to cat/kitten, and/or dog/puppies?		
Do you understand that in order to play an active role in the placem	ent of the cat/kitter	n and or dog/puppies,

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you must work in	collaboration	with the shelter	director to ensure t	hat the new home	meets our guidelines?

Yes	🗌 No
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COWLEY COUNTY HUMANE SOCIETY FOSTER CARE AGREEMENT PLEASE READ AND SIGN

- 1. I understand the goals and mission of the CCHS and, as a CCHS volunteer, agree to work toward these goals and to represent this mission with the community on behalf of the organization. My commitment includes abiding by CCHS foster care guidelines. This includes, **but not limited to:**
 - A commitment to keep CCHS's foster cats/ dogs/ kittens/ puppies indoors and not to expose them to other animals that have access to outdoors.
 - A commitment to follow CCHS's instructions when regarding medical care.
 - A commitment to keep detailed, dated medical records (which will be made available for adopters), and ensure that an up to date copy is also on file at CCHS's facility.
- 2. I understand that only CCHS's Shelter Director have the authority to make exceptions/ changes to program guidelines.
- 3. I understand that **CCHS is the sole guardian** of cats/kittens/dogs/puppies in foster care and that fostered cats/kittens/dogs/puppies **must be returned to CCHS upon CCHS's request.** I understand that CCHS has the right to terminate this foster care agreement and relationship at will.
- 4. I understand that if I, as a foster volunteer, want to adopt any of my foster. I must go through the standard CCHS adoption process. I also understand that I cannot send any of my foster cats/ kittens and/or dogs/puppies to an adoptive or potential adoptive home until the cats/kittens and/or dogs/puppies have been altered, the adoption process has been completed by the Shelter Director. Furthermore, I must have permission for the Shelter Director before sending my foster cats/kittens and/or dogs to another approved CCHS foster home. I also understand that expenses for food, litter, treats, scratch post, etc. cannot be applied toward adoption seed should I adopt one of my fosters.
- 5. I understand that foster cats/kittens and/or dogs/puppies need to be taken to CCHS's Vet for any and all medical needs. CCHS funds all medical care, and in the event of a medical emergency after hours or on the weekend approval is needed by the Shelter Director, and only if the medical care is provided at a CCHS approved veterinary clinic or hospital. I understand that if I choose to take my foster cats/kittens and/or dogs/puppies to an emergency veterinary hospital without prior approval from the Shelter Director, CCHS will not reimburse me for the expenses incurred.
- 6. I understand that there is a possibility of health or injury risk when caring for animals. I also understand that pregnant women and people with suppressed immune systems need to be aware that a parasite sometimes found in feces could cause toxoplasmosis. Special care needs to be taken if such person's plan to come in contact with used litter pans. I will not hold CCHS liable for any injury or illness, whether to the animals or humans in my home, which may result from my foster activities.
- 7. I understand that if I need to leave town during my foster period that I will need to give two-week notice when possible to the Shelter Director for my animals to be placed back to the shelter.

Foster Parent Print Name	Foster Parent Signature	Date
CCHS Representative Signature	Foster Coordinator Signature	Date
Name(s) of foster cats/kittens and/or d	og/puppies sent to foster on:	

"OUR MISSION IS TO ENGAGE THE HEARTS, HANDS AND MINDS OF THE COMMUNITY TO HELP ANIMALS AND PROVIDE RESOURCES FOR THOSE WHO REQUIRE SUPPORT FOR THE ANIMALS IN THEIR LIVES." COWLEY COUNTY HUMANE SOCIETY | 7648 222ND RD | WINFIELD, KS 67156 | 620.221.1698 | CCHUMANESOCIETY1@GMAIL.COM