

Cochise Canine Rescue

PO Box 87 – Pomerene AZ 85627

Jeff Robbins and Sybil Erden -- Rescue coordinators

520-212-1718 ~~~ sybil@cochisecaninerescue.org

Foster Home Application

This agreement is between Cochise Canine Rescue (hereafter referred to as CCR) and

(Your name) _____ (hereinafter referred to as Foster Applicant.) Foster Applicant is interested in caring for Dog(s) pulled from high-kill shelters by Cochise Canine Rescue until they can be Adopted.

Important Note: The Foster Homes are responsible for any Veterinary expenses and food, cleaning supplies etc which are required for the care of the animals in their care. We will reimburse the entire amount of the Adoption fees when the dog is adopted, up to the amount of receipts, but cannot and will not reimburse more than the Adoption Fee.

ALL paper work (intake papers, microchip and spay certificates, as well as expense receipts) MUST be sent to CCR, either by scanning and emailing to info@cochisecaninerescue.org - or via snail-mail). You will receive a TAX DEDUCTIBLE donation receipt for all your costs.

Keeping a dog without permission or placing a dog through any non-approved means is THEFT which Cochise Canine Rescue will prosecute to the fullest extent of the Law!!!

The Applicant allows CCR or CCR's representative to call or write the below references including Veterinarians,

Applicant gives CCR permission to contact references, employers, landlords et. al. in order to confirm the validity of the statements made below.

Name of Applicant: _____

Address: _____ City, State Zip: _____

Phone #s: _____

Own? ___ Rent? ___ If renting, name & phone # of Landlord _____

(If renting you will need a letter from your landlord approving the keeping of foster animals.)

Page 2 of 4 – Foster Application

I agree to a Home Check before approval as a Foster Home by CCR or one of CCR's agents. ____ Yes ____ No

I agree that an agent of CCR may come by to visit the animals in my care with 24 hours notice. _____ Yes _____ No

Where will the dog(s) sleep? _____

Hours the dog(s) will be alone (without human supervision) during the day: _____

Where will the dog(s) be kept when alone? _____

I have ____ do not have ____ a fenced yard.

Height and construction of fencing _____

I do ____ do not ____ have a swimming pool.

If yes, it has ____ does not have ____ fencing appropriate to keep foster animals out of the pool.

Number of people in home _____ Ages of Children: _____

Other pets/animals in home: _____ Ages: _____

I have a separate space to keep my animals and the foster animals separated during quarantine and if there are conflicts ____ yes ____ no

After proper quarantine period (at least 7-14 days) I plan on introducing the animals and treating the Foster as one of the family ____ yes ____ no

If you had to move, where would your animals and the Foster animals go? _____

If you have to travel on business/vacation/or in an emergency, where will your animals go or who will care for them? _____

Your Veterinarian's Name: _____ Phone # _____

Page 3 of 4 – Foster Application

I will be taking the Foster animal(s) to the Vet on the way home _____yes_____no

Only if they seem sick_____

Employer: Company and supervisor's name_____

Phone # _____extension:_____

How long: _____years_____months Position:_____

I have experience Bottle feeding and will accept orphan puppies _____kittens_____

2 non-related RESCUE references i.e. people working with bone fide Rescue organizations who know you for over 1 year, or people you have worked with in Rescue for over 1 year:

Reference #1 Name _____phone #:_____

Reference #2 Name _____phone #:_____

Personal references (friends, coworkers)

Reference #1 Name _____phone #:_____

Reference #2 Name _____phone #:_____

I understand that dogs/puppies can be destructive. I will not hold CCR liable for any damage done by foster animals in my care. _____Initial

I understand that the dogs I will be caring from are pulled from high-kill shelters and may be frightened, nervous or skittish and I am willing to work through this. I will not hold CCR liable for any injuries sustained by a person or animals due to a CCR foster dog. _____Initial

I understand that if at ANY time I can no longer keep this dog, that s/he MUST be returned to CCR or a person/rescue selected by the CCR. The dog(s) MAY NOT go to a pound or shelter - if a dog ends up in a shelter, fees equaling the cost of retrieving the dog(s) will be applied! _____Initial

By my signature I affirm that the above is true and complete to the best of my knowledge and ability and that neither I nor anyone in my family have never been arrested for any form of animal cruelty, hoarding, dog fighting or cock fighting....nor have I been fired from or removed from a position working in Animal Welfare for any reason:_____Initial

Signature:_____Date:_____

PRINT YOUR NAME_____