

# Cheatham County Animal Control Foster Questionnaire

## Willing to Foster

| Cats  | Dogs  |
|---|---|
| <input type="checkbox"/> Bottle Feeding           | <input type="checkbox"/> Bottle Feeding           |
| <input type="checkbox"/> Nursing Mom<br>& Kittens | <input type="checkbox"/> Nursing Mom<br>& Puppies |
| <input type="checkbox"/> Independent<br>Litter    | <input type="checkbox"/> Independent<br>Litter    |
| <input type="checkbox"/> Independent<br>Kitten    | <input type="checkbox"/> Independent<br>Puppy     |

DATE: \_\_\_\_\_

(Applicants must be 18 years of age or older and hold a valid ID with current address. A copy of your rental lease agreement may be required if applicable.)

Pet Foster Questionnaire: The purpose of these questions is to help us understand where the pet or pets will be housed and cared for. We try our best to work for a successful foster experience for the pet and foster.

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Email address: \_\_\_\_\_

Drivers License # : \_\_\_\_\_ State: \_\_\_\_\_

Employer Name & Number: \_\_\_\_\_

**Emergency Contact:**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Relation: \_\_\_\_\_

Do you own your home? YES OR NO                      Do you rent? YES OR NO

If you rent, please supply name, address & phone number of landlord: \_\_\_\_\_

\_\_\_\_\_

Circle one:    House            Apartment            Condo/Townhouse            Mobile home            Other

Does your rental agreement permit you to have pets? YES OR NO

How many adults live in the household? \_\_\_\_\_ How many Children? \_\_\_\_\_

Do you have pets? YES OR NO How many pets? \_\_\_\_\_

What kind of pets do you have? \_\_\_\_\_

Are any of your animals under 1 year old? \_\_\_\_\_

Have you experienced any problem with any of the following? (Please Circle)

Parvo Feline Leukemia Feline AIDS

Distemper Upper Respiratory Infections-Cats Feline Infectious Peritonitis

Rabies Upper Respiratory Infections-Dogs Leptospirosis

Coccidia Pneumonia-Dogs Scabies Mange

Are your pets spayed/neutered? \_\_\_\_\_ Where did you get your pets?

Are any of you animals on a flea/ heartworm preventative? \_\_\_\_\_ What kind? \_\_\_\_\_

Do you have a fenced in yard? YES OR NO What kind of fence? \_\_\_\_\_

How high is the fence? \_\_\_\_\_

Where would the animal that is being fostered be kept when you are away from home? Please explain in detail:

Have you ever fostered animals for an agency before? YES OR NO

If yes, with what agency? \_\_\_\_\_

Are you interested in fostering: Cats Or Dogs

Would you be interested in fostering litters of puppies or kittens? YES OR NO

How many animals will you be willing to foster at one time? \_\_\_\_\_

Have any of your animals died in the last 12 months? \_\_\_\_\_ Cause(s)? \_\_\_\_\_

Do you breed animals? \_\_\_\_\_ What breed(s) and for how long? Where do your animals end up?



**CHEATHAM  
COUNTY**

*A great place  
to raise a family*

**Animal Control • Division of Rabies Control**

2797 Sam's Creek Road

Pegram, TN 37143

(615) 792-3647

Cheatham County Animal Control  
Foster Program Rules

1. All animals fostered are the property of Cheatham County Animal Control. As such, they will be returned to animal control when requested.
2. Any medication, vaccination, or veterinary care must be approved by the Director of animal control.
3. The foster is liability for any injury or damage caused by said animal, and from causes of action, claims, suits, or demands whatsoever that occur while the animal is in the possession of said foster.
4. The foster must report any changes in residence or employment within 48 hours.
5. If the foster is going on vacation, leave, or travel where the animal would be alone for more than 24 hours or kenneled, the animal control must be notified.
6. Fostered animals must be kept at the foster's residence. The animal can not be given, lent, left, or abandoned at any other location. 7. Animal control reserves the right to investigate the foster's home with 24 hours notice.

By signing below, I certify the information I have given is true. I authorize Cheatham County Animal Control to investigate all statement in this application as it sees fit. I understand that a home visit &/or phone call may be made by a representative. Further, this application is the property of Cheatham County Animal Control which reserves the right to accept or deny any application. Any misrepresentation of facts could result in my loss of animal foster privileges.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of staff taking information: \_\_\_\_\_

Disclosure & Release Statement:

I \_\_\_\_\_ (Foster name), the undersigned do hereby declare I am aware:

1. That animals are different from human beings in their response to human actions.
2. That the actions of animals are often unpredictable.
3. That animals should be closely supervised with children.
4. That an animal's behavior may change after it leaves the shelter and acclimates to its new home or different environment.
8. That Animal Control makes no claim or representation as to the temperament, health, or mental disposition of any animal put up for foster.

I hereby accept possession of and responsibility for the animal specified above and hereby release and discharge Animal Control forever from liability for any injury or damage caused in the future by said animal, and from causes of action, claims, suits, or demands whatsoever.

Foster: \_\_\_\_\_ Witness: \_\_\_\_\_ Date: \_\_\_\_\_

**Cheatham County Animal Control FOSTER AGGREEMENT & WAIVER**

Thank you, for fostering an animal for Cheatham County Animal Control Foster Program. Please read, initial, and sign.

I, \_\_\_\_\_ have read, understand, and agree to abide by the conditions of Cheatham County Animal Control Foster Program Policies & Procedures/Waiver. I understand that all work done with Cheatham County Animal Control Foster Program is at my own risk, and hereby release Cheatham County Animal Control and its members of any and all public liability, property damages, and medical costs while I foster for Cheatham County Animal Control Foster Program.

**RELEASE OF LIABILITY**

I have read and fully understand the Cheatham County Animal Control Foster Program Policies and Procedures. \_\_\_\_\_ (Initial)

There have been no other representatives or promises other than those included in this Foster Agreement. \_\_\_\_\_ (Initial)

I understand that all rescue Foster work done with Cheatham County Animal Control Foster Program is at my own risk. \_\_\_\_\_ (Initial)

I, hereby, for myself, my heirs, administrators, and assigns, fully, irrevocably, and unconditionally release and agree to hold harmless Cheatham County Animal Control and its individual members from any and all known or unknown anticipated or unanticipated, suspected or unsuspected and/or fixed, conditional or contingent, actions, causes of action, charges, suits, debts, demands, claims, contracts, covenants, liens, rights, liabilities, losses, royalties; costs, expenses( Including, without limitation, attorneys' fees) or damages, including but not limited to any medical costs, damages to property, persons or other pets, of every kind, nature and descriptions, at law or in equity, in connection with or arising from while I am fostering for Cheatham County Animal Control Foster Program.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Thank you so much for your interest in helping the animals by fostering. Someone from the Cheatham County

Animal Control will be in touch with you regarding your application.