**PAMLICO ANIMAL WELFARE SOCIETY (PAWS)**

**P. O. Box 888 Oriental, NC 28571**

**Contact:** **mail@pamlicopaws.net** **or (252) 745-7297**

**PAMLICO ANIMAL WELFARE SOCIETY (PAWS) “NEW LEASH ON LIFE” (NLOL)**

**FOSTER CARE**

As a foster family for the PAWS NLOL Program, I/we \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ herein promise and agree to the following conditions:

1. To keep this dog in my/our personal possession, provide proper and sufficient food, water, shelter, grooming, love, and humane treatment at all times.
2. Allow PAWS access to animal for veterinary care at once if he/she becomes sick or injured, to keep current on heartworm medication and vaccination against rabies, distemper, parvo virus, Lyme, corona viruses, and canine flu.
3. Will relinquish the animal to a PAWS representative for purposes of training or and or showing the animal to prospective adopters. Fosters can complete and adoption application and will be given priority status during the adoption process.
4. To obey all animal control regulations governing the area in which I/we live.
5. To provide him/her a secure collar to be worn at all times. PAWS does not condone the use of electronic shock collars.
6. To allow a PAWS representative to periodically visit him/her and assess living conditions. If conditions are judged to be unsatisfactory or if there is reasonable belief that the dog is being neglected or mistreated, I/we will surrender the dog immediately to said representative for return to PAWS. If a dog is reclaimed by PAWS, the contract for adoption will be voided.
7. To assume full responsibility for the dog’s actions and for any damage done by the dog, as well as hold PAWS and its representatives/rescuers harmless from any claims of liability for conduct of the dog after taking possession of the dog.
8. To keep the dog as a household pet and companion, to include giving the dog attention, daily care, and making arrangements for appropriate care if I/we are away.
9. To ensure that the dog kept is in a secure, fenced yard or kennel run with water, shade, and adequate shelter from the elements when outside and unattended.
10. To provide adequate exercise for the dog and to never allow the dog to run loose without adequate supervision, and to never chain/tie him/her without being in attendance.
11. To never allow him/her to be transported in the open bed of a pickup truck or similar vehicle, without being enclosed in an adequately secured animal crate, and to not leave him/her unattended in a car.

I/we have read and hereby agree to fully abide by the Terms of Fostering listed

Applicant/s Signature/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PAWS Representative’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

***PAWS relies solely on fundraising, donations, and grants, and is a nonprofit, 501(c)3 organization committed to providing financial assistance to those needing help with spaying or neutering their pets, and so much more.***

***Please visit our website at PamlicoPaws.net***

***.***

***PAWS meets on the third Monday of each month at 4:00 pm in Oriental’s Town Hall - Please join us!***

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**PAMLICO ANIMAL WELFARE SOCIETY (PAWS) “NEW LEASH ON LIFE” (NLOL)**

**Foster Application**

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

**Note: Personal interview/home visit are required prior to becoming a foster family.**

Which type of dog are you willing/able to foster? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you interested in adopting the dog you foster? \_\_\_\_\_\_ Yes \_\_\_\_No

Do you have any experience with dogs? \_\_\_\_ Yes \_\_\_\_ No. If yes, describe. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you learn about PAWS?

\_\_\_\_ PamlicoPAWS.net \_\_\_\_ PetFinder.com \_\_\_\_ TownDock.net \_\_\_\_ Pamlico News \_\_\_\_ Sun Journal

\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Full Name (last, first)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Best time to contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you: \_\_\_\_ Own \_\_\_\_ Rent a \_\_\_\_ Home, \_\_\_\_ Apt \_\_\_\_ Condo \_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. If you are a renter, do you have the landlord’s permission to have a dog? \_\_\_\_ Yes \_\_\_\_ No.
3. Landlord’s contact information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Your Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Work Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Who will be responsible for this dog?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Ages and genders for other members of your household: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Does any member of your household have any animal allergies? \_\_\_\_ Yes \_\_\_\_ No. If yes, describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Describe any regular visitors (human or animal) with whom your dog must get along: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Describe your experience with shelter animals (including breed, sex, age, and what happened):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Do you currently have any other pets? \_\_\_\_ Yes \_\_\_\_ No. If yes, provide breed, age, sex: \_\_\_\_\_
6. Are your other dogs/cats spayed or neutered? \_\_\_\_ Yes \_\_\_\_ No. If no, explain why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. Do you have a regular veterinarian? \_\_\_\_ Yes \_\_\_\_ No. If yes, provide name and phone number:
8. Vet Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
9. How long will the dogs be left unattended per day/night? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
10. Do you have a fenced yard? \_\_\_\_ Yes \_\_\_\_ No. If yes, describe area, height, and type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
11. Is there adequate shade, shelter and water in the area at all times? \_\_\_\_ Yes \_\_\_\_ No.
12. Do you have an area to separate the dog from other animals (illness/acclimation)? \_\_\_\_ Yes \_\_\_\_ No.
13. Are you aware of the animal control regulations in your area? \_\_\_\_ Yes \_\_\_\_ No.
14. Are there any leash laws in your area? \_\_\_\_ Yes \_\_\_\_ No.
15. How will you handle the dog’s exercise and toilet needs? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
16. Describe any restraint device to be used on the dog (PAWS DOES NOT CONDONE THE USE OF ELECTRONIC COLLARS): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
17. Describe any obedience training, or past experience with behavioral or medical issues: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
18. Where will the dog spend the day?

\_\_\_\_ Loose, indoors \_\_\_\_ In crate \_\_\_\_ Room, \_\_\_\_ Garage \_\_\_\_ Fenced yard \_\_\_\_ Kennel/Run

 \_\_\_\_Other: If other, describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Where will the dog spend the night?

\_\_\_\_ Loose, indoors \_\_\_\_ In crate \_\_\_\_ Room, \_\_\_\_ Garage \_\_\_\_ Fenced yard \_\_\_\_ Kennel/Run

\_\_\_\_ Other: If other, describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Are you willing to work through unexpected hardships (e.g. house training, marking in the house, separation anxiety, breaking out of crate, fear, socialization issues, and acclimation to other pets)?

 \_\_\_\_ Yes \_\_\_\_ No.

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1. What circumstances would cause you to consider return this foster to PAWS? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Do you have a plan for temporary placement of this dog in the event of an emergency where you can separate this dog from family or other pets until a PAWs representative can pick up the dog.
3. Do you agree that PAWS representatives may follow up visits/inquiries regarding the dog’s well being?

\_\_\_\_ Yes \_\_\_\_ No.

Please provide three personal references with contact information (Note: only one may be a family member)

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Note: If references are not provided (or listed as “upon request”), PAWS will not consider this application.

I understand that PAWS makes no guarantee about the dog’s temperament, age, or health, and is not responsible for future damage or injuries caused by the dog. \_\_\_\_ I agree \_\_\_\_ I disagree.

I give PAWS permission to call or visit my house (at a reasonable hour) to assure that the animal is being properly cared for. \_\_\_\_ I agree \_\_\_\_ I disagree.

I agree to keep PAWS informed of my current address and phone number. \_\_\_\_ I agree \_\_\_\_ I disagree.

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Applicant/s Signature/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I would like to join our email list? \_\_\_\_ Yes \_\_\_\_ No.

*Thank you for your interest in fostering a New Leash on Life companion. PAWS wants the best match possible for our dogs. PAWS representatives will review all applications and notify qualified applicants. If selected as a qualified foster family, a PAWS representative will call to set up a telephone interview and discuss plans for a home visit and for meeting your new foster pet.*

**Please return both the signed Foster Care Form and the Foster Application to:**

**PAWS NLOL Adoptions**

**P.O. Box 888**

**Oriental, NC 28571**

**or by email:**

**mail@pamlicopaws.net**

**If you have any questions about a dog or the adoption process, call:**

**Jackie Schmidt, PAWS President (252) 649-5504**

**Kathleen Kieffer, PAWS Chair (703) 819-8835**

**Sue Ward, PAWS NLOL (252) 626-3899**