



# Animal Friends of the Valleys

33751 Mission Trail • Wildomar, CA 92595

## Foster Parent Application

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

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

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

E-mail: \_\_\_\_\_

I would like to foster:

Kittens \_\_\_\_\_ Cats \_\_\_\_\_ Puppies \_\_\_\_\_ Small Dogs \_\_\_\_\_ Large Dogs \_\_\_\_\_ Other \_\_\_\_\_

Do you live in a (circle one):      House          Condo          Apartment      Mobile Home

Do you own or rent: \_\_\_\_\_      Landlord's name: \_\_\_\_\_      Phone: \_\_\_\_\_

Please list other members of your household: # of adults \_\_\_\_\_ # of children \_\_\_\_\_

Ages of children in household: \_\_\_\_\_

What kind of pets do you have currently?

Type/Breed	Age	Sex	Spayed/Neutered	Indoor/Outdoor

Are you pets licensed: \_\_\_\_\_      Are your pets currently vaccinated: \_\_\_\_\_

Name of your veterinarian: \_\_\_\_\_

Where will you keep the foster pets: \_\_\_\_\_

***I have read and understand the foster parent guidelines attached.***

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

For Staff use only: Approved by: _____      Date: _____
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