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| **For Our Friends, Inc. P.O Box 203Oakland Gardens, NY 11364http://www.forourfriends.org** |

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| **FOR OUR FRIENDS, INC. ADOPTION/FOSTER APPLICATION** |
| Name of Pet you are interested in: |   |
| Are you interested in Fostering or Adoption: |   |
| **PERSONAL INFORMATION** |
| Name  |   |
| Spouse's Name |   |
| Current Address |   |
|   |
|   |
| Cell Phone |   |
| Home or Work Phone |   |
| Best time to call? |   |
| Current Occupation |   |
| Work Hours |   |
| How long have you been at your current employer? |   |
| Spouse's Occupation |   |
| Work Hours |   |
| How long at current employer? |   |
| How many adults are there in your home? |   |
| How many children are there in your home? Include ages  |   |
| **HOME** |
| Do you own or rent? |   |
| How long at current address? |   |
| Is your yard securely fenced in? |   |
| How high is the fence? |   |
| If you rent: |
| Are pets allowed? |   |
| Any breed or size restrictions? |   |
| Landlords name and phone number |   |
| **LIVING ENVIRONMENT** |
| Who will be in charge of the pet's daily care? |   |
| Where will the pet spend most of the day? |   |
| Where will the pet sleep? |   |
| How long will the pet be left alone? |   |
| Please describe the activity level in your house |   |
| Are there other pets in the household? Please list type, age and health condition: |
| 1- |
| 2- |
| 3- |
| 4- |
| Tells us about your previous pets. Please include type of pet and history: |
| 1- |
| 2- |
| 3- |
| 4- |
| **TRAINING** |
| Please explain your past experience with training, if any |   |
| Are you willing to work with a trainer? |   |
| **REFERENCES**  |
| Veterinarian Reference, please include Name and Phone number  |
| **Name of Vet and Office** | **Phone Number:** |
|   |   |
| If no Vet reference available, please provide the name and phone number of 3 personal referencesPlease do NOT include family members |
| **Name of Personal Reference:** | **Phone Number:** |
| 1- |   |
| 2- |   |
| 3- |   |
| **ADDITIONAL INFORMATION** |
| Please provide any additional information we should know about you and your family |
|   |