



City of Little Rock

Housing and Neighborhood Programs
Animal Services Division
4500 South Kramer Street
Little Rock, AR 72204
(Office) 501.376.3067 (Fax) 501.376.7856

Little Rock Animal Services Foster Application

General Information

Name: _____ Date: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: (Home) _____ (Cell) _____ (Office) _____

Email: _____ Age: _____

Driver's License Number: _____ State: _____

Occupation: _____ Employer: _____

Emergency Contact

Name: _____ Relationship: _____

Phone: (Home) _____ (Cell) _____ (Office) _____

Home Address: _____ City: _____ State: _____ Zip: _____

Tell us about yourself

What type of housing do you have? Own Rent If rent, is a security deposit required in order for you to have pets? Yes No If yes, has the deposit been paid? Yes No

Please provide the contact information for your land lord or rental agent _____

If a house, do you have a fenced yard? Yes No

If an apartment or condo, are you allowed to have pets? Yes No

Do you have other pets at home? *Please understand that the legal limit of pets is four (4) dogs over the age of four (4) months and four (4) cats over the age of four (4) months. Any foster that you get will count toward that limit. Please list your pets:

Name	Breed	Age	Sex	Sterilized	Updated Vaccines (Y/N)
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____

(Application continues on back...)



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What type of food do you feed your pets? _____

** All food requirements are the responsibility of the foster care provider, and all food must be approved by Little Rock Animal Services (LRAS).*

Who is your veterinarian? Please add contact info. _____

Please list all persons that reside at the above address, including their ages.

Who will be the primary caretaker for the foster animal(s)? _____

Do you plan to crate the animal when you are gone or during the night? Yes No

If yes, approximately how many hours a day will the foster animal(s) be alone? _____

What animals are you interested in fostering? Please check all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Dog | <input type="checkbox"/> Cat |
| <input type="checkbox"/> Puppy | <input type="checkbox"/> Kitten |
| <input type="checkbox"/> Litter of Puppies | <input type="checkbox"/> Litter of Kittens |
| <input type="checkbox"/> Litter of Puppies with Mother | <input type="checkbox"/> Litter of Kittens with Mother |

** All dogs or cats going to foster will be sterilized prior to going into the program with the exception to nursing mothers or puppies or kittens that are too young to sterilize. These will be required to be returned to LRAS as soon as the babies are weaned or the puppies are old enough to be sterilized.*

What situations are you available to handle? Please check all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Sick | <input type="checkbox"/> Underweight |
| <input type="checkbox"/> Injured | <input type="checkbox"/> Very Young/Bottle Feeding |
| <input type="checkbox"/> Not Housebroken | <input type="checkbox"/> Needs Socialization |
| <input type="checkbox"/> Needs Obedience Training | |

How will you try to find an adopter for your foster pet(s)? _____

Do you agree to notify LRAS if the foster becomes ill and needs medical attention? Yes No

** All veterinarian care will be provided by LRAS and any outside care must have prior approval or cost will be the responsibility of the foster care giver.*

Do you agree to notify LRAS immediately if the foster runs away or is missing? Yes No



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Do you agree to notify LRAS if the foster shows signs of aggression that would make it a danger to other people or animals? Yes No

Do you agree to inform potential adopters that they must first apply to adopt at LRAS, and pay the adoption fee before they can take possession of the foster? Yes No

**No animal can be adopted straight from the foster care provider, the applicant must first come to the shelter and fill out the appropriate paperwork.*

**Any adopted dog must be returned to LRAS for evaluation and checkup by the veterinarian and scheduled for surgery if not sterilized.*

Do you agree to notify LRAS if you can no longer foster the animal(s) in your home, and to return them to LRAS if needed? Yes No

General Agreement

In signing the below, I understand and agree to the following items:

- I agree to attend the first volunteer training session, as well as the foster training session;
- I authorize Little Rock Animal Services to seek emergency treatment in case of accident, injury, or illness;
- I agree to abide by the policies and procedures presented to me at the volunteer training classes;
- I understand that if I am injured while acting as an unpaid member of the volunteer staff, that the Arkansas State Worker's Compensation Law does not cover me;
- Little Rock Animal Services has my permission to use any and all photographs taken of me to promote services and programs or to publicize any event. I understand that all prints and negatives become sole property of Little Rock Animal Services and may be used without payment or prior notification;
- I can in no way represent Little Rock Animal Services to any form of media and I will direct them to contact an LRAS employee;
- I hereby acknowledge that the information in this application is, to my knowledge, accurate.

Printed Name

Signature

Date