**BCOD Foster Application & Agreement**

|  |  |
| --- | --- |
| Name | Click here to enter text. |
| Address | Click here to enter text. |
| Phone | Click here to enter text. |
| Email | Click here to enter text. |
| Driver’s License Number | Click here to enter text. |
| Rent/ Own | Click here to enter text. |
| Landlord Name | Click here to enter text. |
| Landlord Phone | Click here to enter text. |
| Veterinarian Name | Click here to enter text. |
| Veterinarian Number | Click here to enter text. |

Please list the animals currently in your home

|  |  |  |  |
| --- | --- | --- | --- |
| Breed | Age | How long have you owned this animal? | Spayed/ neutered? |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

Which BCOD animal are you interested in fostering?

Click here to enter text.

When are you available to begin fostering?

Click here to enter text.

Are all of your current animals up to date on vaccinations? Click here to enter text. 

If no, please explain: Click here to enter text.

Do you agree to care for this animal as if it were your own?

Click here to enter text.

Do you agree to keep BCOD up to date with photos and any relevant information about the animal?

Click here to enter text.

Please be aware that most of the animals we take in come in from rural shelters and we often do not have much information about them. We rely on our fosters to get to know the animals and help with basic training of the animals. The amount of time each animal needs a foster will vary. BCOD will supply food and veterinary care but will not be held responsible for any damage to person, property, or other animals that the animal may cause. By signing this Foster Application, you acknowledge and agree to these terms.

Foster’s Signature: Click here to enter text.

Date: Click here to enter text.

Thank you for helping us save lives!