

Sophie's Circle

Foster Home Application

Name		
Address		
City	State	Zip
Home Phone	Cell Phone	Work Phone
Email Address		

Do you OWN your home or RENT?		<i>If Rent, please fill in Landlord Information below.</i>
-------------------------------	--	--

Landlord Name		
Address		
City	State	Zip
Phone		

Please answer the below questions so that we can help determine the "best" foster match for you and your family.

How many Adults in Home?		Home many Children in Home?		Ages of Children?	
--------------------------	--	-----------------------------	--	-------------------	--

What is the Activity Level of Your Family?	Sedentary or Moderately Active or Extremely Active
--	--

Is your yard completely fenced?		If so, what type of fencing?	
---------------------------------	--	------------------------------	--

Current Pets

Name	Species/Breed	Age?	Vaccinated?	Heartworm/Flea Prevention?	Is your Pet Spayed or Neutered?

Veterinarian Name		
Address		
City	State	Zip
Phone		

Tell us about your current pets so we can make sure your foster is a good match

Name	Personality? Energy level? Submissive or Dominate? Socialized? Any issues with food and/or toys? Anything else we should know about your pet?

How much time do dogs spend outside alone?	
How many hours per day do dogs spend alone?	
Where do dogs stay when you are not home?	
What is your feeding routine for dogs and cats?	

Tell us about your experience with animals. (Own, Train, Foster, Etc.)	

When it comes to relating to dogs do you consider yourself:	
<ol style="list-style-type: none"> 1. Strict, demanding, a strong leader (dog must sit for a cookie and follow my rules) 2. Lenient, a little wishy washy, easily coerced by the dog (the dog looks cute so he gets a treat without sitting, can jump on the couch uninvited) 3. Somewhere in between 	

Are you willing to foster any of the following special-needs pets? Check all that apply.

Pets with Medical Issues?	<input type="checkbox"/>	Pets with Behavioral Issues?	<input type="checkbox"/>
Pets that are not Housebroken?	<input type="checkbox"/>	Pets needing Socialization?	<input type="checkbox"/>

What type of pets do you prefer to foster? Check all that apply.

Adult Dogs?	<input type="checkbox"/>	Large Breeds?	<input type="checkbox"/>	Medium Breeds?	<input type="checkbox"/>	Small Breeds?	<input type="checkbox"/>
Puppies? Up to what Age?	<input type="checkbox"/>	Bottle-Fed Puppies?	<input type="checkbox"/>	Pregnant Dogs?	<input type="checkbox"/>	Nursing Dogs with Puppies?	<input type="checkbox"/>

Specify any specific dog breed(s).	
------------------------------------	--

If you foster for Sophie's Circle, would you need to have any of the following provided for you? Check all that apply.

Crate?	<input type="checkbox"/>	Pet Food?	<input type="checkbox"/>	Treats?	<input type="checkbox"/>
Transportation to Events?	<input type="checkbox"/>	Transportation to Vet Appointments?	<input type="checkbox"/>		

You can return this application by:

Email - mtsophiescircle@gmail.com and Jennifer.Popowich@gmail.com

