



OC Animal Care



OCAC STAFF TO COMPLETE THIS SECTION

PID:

- G003605 Dog (circle) SM LG
- G003606 Bottle Kitten Fosters
- G003607 Cat/Kitten Fosters
- G003608 Others:

Foster Caretaker Application

Contact Information:

LAST NAME		FIRST NAME	DATE OF BIRTH	
MAILING ADDRESS		CITY	STATE	ZIP CODE
TELEPHONE NUMBER(S)				
HOME ()	OTHER ()		E-MAIL:	
EMERGENCY CONTACT				
NAME:	PHONE ()		E-MAIL:	
STAFF MEMBERS, PLEASE LIST YOUR POSITION HERE:				

Tell us about yourself

What type of home do you live in? (Permission from the owner is required)

If Other, please specify:

Have you fostered animals before?

If yes, with what organization and what type(s) of animal(s)? Do you currently foster for other rescue groups?

If no, what experience have you had with animals that would be helpful in fostering?

Please select the types of animals you are able to foster and note the number of each animal you are able to take.

(All fosters, even healthy animals, will require regular trips to the shelter for booster vaccines and or checkups and treatment. Fosters must be available to bring these animals for appointments.)

- | | | |
|------------------------------|------------------------------|-----------------------|
| Healthy Kittens _____ | Healthy Puppies _____ | Adult Sm/Md Dog _____ |
| Injured/Ill Kittens _____ | Injured/Ill Puppies _____ | Adult Lrg _____ |
| Bottle Kittens _____ | Bottle Puppies _____ | Rabbits _____ |
| Adult Cat w/ Kittens _____ | Adult Dog w/ Puppies _____ | Reptiles _____ |
| Injured/Ill Adult Cats _____ | Injured/Ill Adult Dogs _____ | Other _____ |

Is there is a specific animal you would like to foster? Please provide their Animal ID

Home Information:

How many hours per day will your foster animal(s) be without supervision?

Do any minors live in, or visit your home regularly?

If yes, what are their ages?

Where do you plan to keep your foster animal(s)?

Do you have any pets in your household now?

Please list quantity below:

Large Dogs

Small Dogs

Cats

Other

Are they spayed or neutered?

Are their vaccinations current?

Do they have any contagious illnesses, even if stable in condition?

Are your animals regularly flea treated? If yes, please list brand:

Are you able to separate your OC Animal Care foster animals from other rescue animals to prevent the spread of infectious disease?

Yes, I am able to separate my foster groups from one another to separate the spread of disease.

No, my foster kittens are all housed in the same area.

N/A I only foster for OC Animal Care

N/A I will foster OCAC Animals OR a rescue group the groups will not overlap

In the last year have you had any animal in your home diagnosed with Parvo/Canine Distemper/Panleukopenia/ Ringworm or Scabies? (If yes, please list the date/type of disease/animals affected).



OCAC Foster Caretaker Agreement

As a Foster Caretaker, I _____,
(Print name here)

1. Will provide the animal(s) with humane care, which includes, but is not limited to, food, water, shelter, grooming, training and medication when required. **INITIAL** _____
2. Understand that I may not bring in outside kittens (found or given to me) and expect them to be added to the OC Animal Care (OCAC) Foster Program. I understand that stray kittens should be surrendered to the shelter, so they can be assessed by our veterinary staff who will determine if they meet the guidelines for fostering. **INITIAL** _____
3. Understand that I must immediately disclose to both OCAC and any other rescue that I foster for if any animals I am fostering for another rescue group are diagnosed or being treated for any contagious illness (parvo, distemper, panleuk, strangles, scabies or ringworm). **INITIAL** _____
4. Understand that a diagnosis of a contagious disease in any of my fosters may make me ineligible to foster animals for the rest of the year due to the ability of certain viruses to survive even intense cleaning. **INITIAL** _____
5. Understand that anyone interested in adopting fostered animal(s) (including myself) must go through the standard adoption process and pay all applicable fees. **INITIAL** _____
6. Recognize that the animal(s) shall remain the property of OCAC while in my care. **INITIAL** _____
7. Understand and acknowledge that I do not have the right or authority to keep the foster animal(s) beyond the return date; or to place the foster animal(s) in a home or care of another individual, including another foster or a rescue group, unless I receive written permission from OCAC. **INITIAL** _____
8. Understand and acknowledge that I am responsible for all expenses incurred as a result of fostering the animal(s). OCAC will provide vaccination(s) and medication for minor existing conditions. Additional expenses incurred, including those at an outside veterinary facility, are at the expense of the Foster Caretaker. **INITIAL** _____
9. Will return the animal(s) to OCAC if I am no longer able to adequately care for the animal(s) or immediately if the animal(s) require(s) any medical treatment. OCAC receives animals daily from 7am to 9pm. After hours (9pm to 7am), please call (714) 259-1122 for assistance. **INITIAL** _____
10. Understand that if my foster animals are returned in unsatisfactory condition (flea infested, unsocial, underweight, etc.) that I may be removed from the foster program. **INITIAL** _____

11. Will not allow any foster dogs or puppies to have any unsupervised off-leash time. I will provide a kennel, crate and/or securely fenced yard for their safety. I will not allow foster cats or kittens to go outside at anytime except to transport them to and from the shelter or to a veterinarian, if needed. I agree to transport any foster cats, kittens, puppies and small dogs in a sturdy carrier. I agree to transport any foster animal(s) in an enclosed vehicle only, and I will not allow them to ride in the bed of a pickup or a convertible.

INITIAL _____

12. Assume responsibility for any events that occur in connection with my fostering of an animal for OCAC. I understand the possibility of my children or others being bitten, scratched, or contracting disease does exist. I agree to be responsible for my children and anyone else handling any animal(s) fostered by me in a safe and hygienic manner and will not hold OCAC responsible for any injuries that may result from my failure to do so.

I AGREE TO NOTIFY AN OCAC REPRESENTATIVE IMMEDIATELY OF ANY BITES THAT BREAK THE SKIN that occur to any person or animal while any foster animal is in my care. **INITIAL** _____

13. Will defend, indemnify and hold OC Animal Care harmless from any direct or remote and consequential damages arising out of this foster care arrangement. **INITIAL** _____

I have answered the questions above truthfully and completely. I understand that although OC Animal Care takes reasonable care to screen animals for foster care placement, it makes no guarantee relating to the animals' health, behavior, actions, or adoptability. I understand that I receive foster care animals at my own risk and can reject or return any animals for which OC Animal Care has asked me to provide care. I also understand that OC Animal Care staff may request to enter the property where foster animals reside with or without notice. I indemnify and hold OC Animal Care and the County of Orange free and harmless from all liability arising out of any and all claims, demands, losses, damages, action, judgment of every kind and description which may occur to or be suffered by me, members of my household, or any third parties by reason of activities arising out of this agreement.

I have read, understand and agree to the terms specified above.

Foster Caretaker Signature: _____

Date _____

Please e-sign and date your document before using the button below to submit your application. We recommend that you check your browser settings if you have any problems viewing or submitting this form electronically. You may also save a copy of this form and email it to foster@occr.ocgov.com. Please contact us if you need assistance.

OCAC Staff to complete this section

Reviewed by: _____

Review Date: _____