



White Wings Rescue Foster Application

Name:

Phone Number:

Email Address:

Address:

Own or Rent:

Landlord's Name:

Landlord's Phone Number:

Does your rental agreement allow
pets? Yes No

Best way to reach you:

Number of people and ages living
within household:

Animals Within Household:

Species	Gender	Age

Are animals spayed/neutered?

Yes No

If no, why not?

Up to date on shots? Yes No

If no, why not?

Your Veterinarian:

Veterinarian's Phone Number:

Have you fostered before? If yes, with
what organization and describe the
situation:



Describe the area/room where your foster feline(s) will be staying while they decompress/quarantine when transitioning into your home?

If accepted, would you like to be added to the Rescue's foster group chat?
Yes No N/A

Check all that you would be able to foster:

- Bottle Babies
- Pregnant/Nursing Cats
- Cats/Kittens with Medical Needs
- Cat/Kittens with Behavioral Issues
- Adult Cats
- Senior Cats

Applications may take at least a week to complete, based on the rescue's schedule, issues with contacting your vet or references, or if your application is deemed incomplete.

As a foster, you are in charge of maintaining the health and well-being of any of our animals under your care. You must be able to contact us if a medical issue arises with the animal under your care, as all medical needs will be provided by White Wings Rescue.

List 3 references who have seen you interact with animals. (Cannot be your current vet, a relative, or a family member.)

Name:

Phone number:

We will supply food, blankets, and medications (if applicable) with every foster. Due to the lack of supplies, we are unable to provide food dishes or litter boxes. We are able to provide some litter, but not much. We not only encourage constant communication between the Rescue and fosters, we also welcome any and all questions that arise while fostering, whatever is needed in order to succeed.

If you are willing to foster bottle babies, but have never done so before, you will need to schedule time for training, which we will provide, and will be subject to a week trial period to determine if bottle feeding is right for you. It will not reflect poorly on you and your future as a foster if you are unable to handle bottle feeding, as

Name:

Phone number:

Name:

Phone number:



long as you have constantly kept the Rescue informed of the situation and haven't purposefully neglected the kitten(s) health.

We maintain the right to refuse any application or current foster deemed unfit. Due to the recent change in Montana's laws involving cruelty to animals, we have the right to inform the authorities if we suspect any abuse done to any of the animals you foster.

By signing below, you are stating that you are 18 years old or older, giving us permission to call everyone listed above, agree to all terms and conditions provided above, and have filled out the form honestly to the best of your abilities.

Signature

Date

Thank you for applying and we will be in contact with you as soon as possible!

White Wings Rescue Use Only
Date Received: _____

Application Approved: Yes <input type="checkbox"/> No <input type="checkbox"/> Incomplete <input type="checkbox"/>
Reason: _____ _____
Comments: _____ _____ _____