



Today's Date: _____ (OFFICE USE ONLY: APPROVED ____ DENIED ____)

Foster Application

Personal Details

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Driver's License #: _____ - _____ - _____ Date of Birth: ____ / ____ / ____

Email: _____

Foster Details

1. Requested Pet Name: _____

2. Do you rent or own your home? Rent _____ Own _____

3. How long have you lived at this address? _____

- If less than one year, please list previous address below:

4. Do you have other pets in the home? Yes _____ No _____

5. Are your current pets spayed/neutered? Yes _____ No _____

6. Are your current pets vaccinated? Yes _____ No _____

7. Do you have children in the home? Yes _____ No _____

- If yes, please list their age: _____

8. Has Animal Control ever been called to your residence? Yes _____ No _____

9. Have you ever been charged with an animal offense in this county or others in the past? Yes _____ No _____

10. Have you ever turned your pet over to the shelter? Yes _____ No _____

11. Will this animal be primarily kept inside or outside? Inside _____ Outside _____

12. Do you have a dog house? Yes _____ No _____

13. Is your yard fenced? Yes _____ No _____



Breckinridge County Animal Shelter

495 Glen Nash Lane | PO Box 227

Hardinsburg, KY 40143

(270) 580-4299

14. Who is your current veterinarian? _____

15. What type of animal would you like to foster? (Check all that apply.)

_____ Kittens

_____ Puppies

_____ Pregnant / Nursing Mothers

_____ Senior Animals

_____ Other

Signature

By signing below, you are certifying the above information is true to the best of your knowledge, and that you are applying to become a foster parent for animals in need at the animal shelter.

Sign: _____ Date: _____