



Animal Services Agency ▪ Agence des fourrières

1057 Logan Avenue, Winnipeg, MB R3E 3N8

Animal Services Agency Foster Parent Application

1. Name: _____

Street Address: _____

City/Town: _____ Postal Code: _____

Telephone(s): _____ (Residence)

_____ (Business)

E-mail address: _____

Reference (Not a relative): Name: _____ Telephone: _____

Are you 18 years or older: Yes No

2. Please check off below the type of accommodations you live in:

a) House single/duplex, etc) If you rent, are you allowed dogs in your house?

Yes No

b) Do you have a completely fenced yard? Yes No

c) Apartment Are you sure dogs are allowed in your apartment? Yes No

3. Have you had a dog before? _____

4. Please list what pets you have now including sex, age, whether altered or not:

5. Please list the people living in your household and ages of children if applicable:

6. Does anyone living in your residence have allergies to pets? Yes No Is anyone living in your residence afraid of dogs? Yes No

7. Are all people in your family aware and in agreement to become a foster family? Yes No

8. Are all your animals up to date on their vaccinations? We highly recommend your dogs are vaccinated for Kennel cough as well as their routine vaccinations.

9. Which Veterinary Clinic do you presently use?

10. What are your reasons for wanting to foster a dog from the Animal Services Agency?

11. Are you familiar with Kennel Cough in Dogs? Can you describe some of the symptoms?

12. Have you had any first aid training? Yes No

13. If your foster animal needed medical attention and our clinic staff concluded that the animal needed to be put to sleep would you support the decision? _____

14. Do you have transportation at all times so that you are able to bring a foster animal back to Animal Services or to a Veterinary Clinic if required? _____

15. Please list any other organizations that you currently foster animals for. _____

16. Are you prepared to foster this dog for extended periods of time, especially if it is a pregnant dog or one with a new litter of pups? This could mean up to 6 weeks after the pups are born. _____

17. Would you be interested in any training made available to assist you in fostering? Yes No

*****If you have any concerns regarding this animal's health or behaviour while you are fostering, please call the Adoption/Community Education Coordinator at 986-7295, or email at lverschoore@winnipeg.ca or call the Kennel Attendant at 986-7024.**

I acknowledge all the above information is correct and I am over 18 years of age.

Signature: _____ Date _____

Staff Witness: _____