

**M&M Pet Rescue**  
**ADOPTION/FOSTER HOME APPLICATION**  
**www.beulahpetrescue.com**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_  
\_\_\_\_\_

Name of animal to foster/adopt: \_\_\_\_\_ Dog \_\_\_\_\_ Cat \_\_\_\_\_

Do you have any pets now? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, how many? \_\_\_\_\_

Current pets: \_\_\_\_\_  
\_\_\_\_\_

Are they spayed/neutered and current on vaccinations? \_\_\_\_\_

Have you had pets in the past and what became of them? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Where will the cat/dog live? Indoors/all the time \_\_\_\_\_ Indoors/sometimes outdoors \_\_\_\_\_

Type of Dwelling: House \_\_\_\_\_ Apartment \_\_\_\_\_ Condo \_\_\_\_\_ Mobile Home \_\_\_\_\_  
Other \_\_\_\_\_

Do you: Own Home \_\_\_\_\_ Rent \_\_\_\_\_

If you rent, what is the pet policy and please provide your landlord's name and phone number:  
\_\_\_\_\_  
\_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

Number of people in home: Adults \_\_\_\_\_ Children \_\_\_\_\_ Ages of Children \_\_\_\_\_

Do you have a fenced yard? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_

Is everyone in your household in agreement with this decision? Yes \_\_\_\_\_ No \_\_\_\_\_

Primary reason you want to foster/adopt this cat/dog: \_\_\_\_\_  
\_\_\_\_\_

Are you employed? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, where? \_\_\_\_\_

How many hours a day would the animal be alone? \_\_\_\_\_

If planning to adopt a kitten/cat, would you declaw? \_\_\_\_\_

Is your home smoke-free? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you willing to spay/neuter (if not already done) and vaccinate per veterinary standards? Yes \_\_\_\_\_  
No \_\_\_\_\_

If the animal becomes sick, how much are you willing to spend for treatment? \_\_\_\_\_

What would you do if it became destructive? \_\_\_\_\_

Are you willing to keep the animal for its lifetime? Yes \_\_\_\_\_ No \_\_\_\_\_

Under what circumstances would you not keep this animal? \_\_\_\_\_  
\_\_\_\_\_

Who is your veterinarian? \_\_\_\_\_  
\_\_\_\_\_

**I hereby verify that all answers given on this application are true to the best of my knowledge.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**References:**

(1) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

(2) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

(3) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_