



**The Cat People**  
**PO Box 13610**  
**Bakersfield CA 93389**  
**661-327-4706**

501(c)(3) Non-Profit Corporation  
 FEIN # 77-0272709

\*\* For Office Use Only \*\*

Cat/Kitten Name: \_\_\_\_\_

Date: \_\_\_\_\_

We appreciate the invaluable service that foster parents provide! We want to make the most informed decision regarding which animals to place in your care. Completing this application is the best way to ensure a positive experience for both you and the animals. Feel free to fill out and submit the foster application via our website at [thecatpeople.org](http://thecatpeople.org) or by mailing to the above address, Attn: Barbara, or dropping off the application at Petco, 8220 Rosedale Hwy., Bakersfield on Saturdays between 10am—3pm.

FOSTER CARE APPLICATION			
APPLICANT INFORMATION			
Name:		Date:    /    /	
Current Address:		City:	Zip Code:
Phone: (    )	Date of Birth:    /    /	Driver License #:	State Issued In:
Email Address:			
WHICH OF THE FOLLOWING SCENARIOS ARE YOU WILLING TO PROVIDE FOSTER CARE?			
Please check all that apply			
Cats with Behavioral Issues		Kittens - 4-8 weeks	
Cats with Medical Issues that May Require Medication		Kittens - 4-8 weeks Requiring Medication	
Senior Cats - 10 years +		Semi-Feral Kittens - Requiring Hands-On Socialization	
Bottle Babies - 0-4 weeks			
* Please note: Orphaned Babies 0-4 weeks will need 24 Hour Care			
Prior experience fostering/caring for cats/kittens:			
YOUR HOUSEHOLD			
Please list family members & others who live in your household, including roommates, students, etc.			
Spouse Name (if applicable):		Number of children in household:	
Names & Ages:			
The primary caregiver will be:		How many hours per day are you away from home?	
Please describe the level of household activity: Quiet:                      Active:		How much time with people will your foster pet have per day?	
Do you:      Own      Rent      Live with Parents		Live in:    House      Condo      Apartment      Mobile Home	
Please describe the living arrangements for your foster animal:			
Will there be a separate room for the foster animal?		Will the foster animal have the run of the house?	

OTHER PETS						
Will you be able to keep the foster animal separate from your own if necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No			Have you had animals before? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Type of Animal	Breed	Age	Sex	How long have you had them?	Spayed or Neutered?	Kept inside, Outside or Both
Do you have a doggie door? <input type="checkbox"/> Yes <input type="checkbox"/> No						

I have answered the questions on page 1 and 2 of this Foster Care Application truthfully and completely. I understand that although The Cat People takes reasonable care to screen animals for foster care placement, it makes no guarantee relating to the health of an animal, behavior, or actions. I understand that the right to foster any animal for The Cat People may be withdrawn at any time. I understand that I receive foster care animals at my own risk and can reject or return any animal for which The Cat People has asked me to provide care. I indemnify and hold The Cat People 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.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

By joining The Cat People Foster Care Program, you are asked to comply with the policies of The Cat People and the expectations of the foster program.

Please read and initial each of the items listed below:

1. I understand my responsibilities as a Foster Parent and have asked any questions I might have. I feel prepared to take on the role of Foster Parent. \_\_\_\_\_
2. I understand that continued participation in the foster program depends on my cooperation with expectations presented to me. \_\_\_\_\_
3. I understand that my foster pet will only be treated by a veterinarian chosen by The Cat People or my pet may be treated by authorized personnel of The Cat People. I further understand that I will not be reimbursed for expenses incurred at my own veterinarian and I am to notify Brenda (661-333-9321) or Barbara (661-599-2719) if my foster pet shows signs of illness. \_\_\_\_\_
4. I understand that The Cat People is not responsible for any illness occurring or veterinary care required for foster parents' own pets. \_\_\_\_\_
5. If I decide to adopt my foster pet, I must finalize this when they become adoptable. \_\_\_\_\_
6. I am willing to take my foster pet to and from weekly adoptions as needed. \_\_\_\_\_
7. I understand that my foster pet is not to be given to anyone (or kept as my own pet) until authorized paperwork is complete and authorized by a designated member of The Cat People. \_\_\_\_\_
8. I understand that my foster pet could possibly become quite ill and not survive or have to be euthanized and the decision to euthanize will be made by the veterinarian chosen by The Cat People. \_\_\_\_\_
9. I understand that The Cat People is not responsible for any damage done by my foster pet to any of my property or my Landlord(s) property including, but not limited to flooring, furniture, people or other pets in my home. \_\_\_\_\_

- 10. I will not allow unsupervised children to play with my foster pet, never let unrestrained pets around my foster pet and will ensure that the foster pet's surroundings are escape-proof. \_\_\_\_\_
- 11. I understand that teen/adult foster pets will not be confined to a cage or room outside my home. I will not let my foster pet have access to a doggy door, torn screen or open window. \_\_\_\_\_
- 12. I will call either Barbara (661-599-2719) or Brenda (661-333-9321) if I notice any change in my foster pet's behavior, including: extreme lethargy, loss of appetite, breathing difficulty, green nasal secretions, lack of weight gain, death or escape of my foster pet. \_\_\_\_\_
- 13. If I am renting I will have the approval of my Landlord(s). \_\_\_\_\_
- 14. My own animals, over 6 months of age, have been altered. \_\_\_\_\_
- 15. I agree to permit an onsite premises visit by a representative of The Cat People. \_\_\_\_\_
- 16. I am to give ample notice when supplies are running low. The Cat People will provide all supplies. \_\_\_\_\_

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**\*\* FOR OFFICE USE ONLY \*\***

The Cat People interviewer: \_\_\_\_\_

Foster Care Application:    Approved       Declined

If Foster Care Application declined, please explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_