

Heart & Soul of Long Island, Inc.

169 Commack Road, Suite H, #352, Commack, NY 11725

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Name (First and Last): _____ Age: _____

Address: _____ City: _____ Zip: _____

Phone(Home): _____ Phone(cell): _____ Email: _____

What type of animal are you interested in fostering: Kitten _____ Cat _____ Puppy _____ Dog _____

What is the number of animals are you are interested in fostering? _____

Are there any restrictions on the type of animal you can foster (i.e. no dogs over 30 lbs.)? _____

Please describe your home. Do you have a fenced in yard? _____

How many adults are in the home? What is their employment status? _____

Where will the foster animal(s) stay during the day and evening? _____

Do you have any children at home? If so, how old are they? _____

Do you have any pets at home? Yes ___ No ___

If Yes, please list breed, names and ages: _____

If No, have you ever owned a cat or dog before? Yes ___ No ___ If Yes, how long ago? _____

Why do you no longer have the cat or dog? _____

Are present pets spayed/neutered? Yes ___ No ___ Up to date on vaccinations (specifically distemper)? Yes ___ No ___

When was the last time they were at the vet? _____

For what reason? _____

Name and phone number of Veterinarian (s) for reference: _____

Could vet records be listed under an alternate name (Maiden name): _____

Name & phone number of person who would be responsible for the animal if you were not home to care for it: _____

Do you own a car? Yes ___ No ___

If No, how would the animal to a vet in case of emergency? _____

Would the animal be indoors or outdoors? In _____ Out ___ Both ___

Do you rent or own your home? Rent ___ Own ___ Live with Parents _____

If you "Rent", please supply us the name and phone number of landlord/management company OR If you "live with Parents", please supply their name and phone number: _____

Foster Information:

• I understand that completion of this form in no way guarantees my ability to foster an animal and that Heart and Soul of Long Island has the right to deny any application at their discretion.

• I further understand that completion of this form is only the first step in the foster process and that, should I want to further the process, I will be required to submit to an in-home inspection and sign a foster contract.

I certify that all information provided as part of this application is true and correct to the best of my knowledge. Additionally, I grant Heart & Soul permission to obtain information from my veterinarian [as named above] to be used solely as part of the processing of this application.

Signature: _____ Date: _____