

Humane Society of Pagosa Springs

Extra Animal Information - Foster Care Agreement

PO Box 2230
465 Cloman Blvd
Pagosa Springs, CO 81147
(970) 731-4771 (970) 264-5549
www.humanesociety.biz

Who is/was your **Veterinarian**? _____ Phone: (____) _____

Is everyone in your household aware that you are fostering a pet? ☐ Yes ☐ No - If not, please explain:

Is anyone in your household allergic to animals? _____

Number _____ of children in household and their ages: _____, _____, _____, _____, _____

Who will be the primary caregiver providing food/water/training/veterinary care? _____

Will you keep this pet: ☐ Indoor ☐ Outdoor ☐ Indoor/Outdoor Explain: _____

The pet will sleep: ☐ Indoor ☐ Outdoor ☐ Indoor/Outdoor Explain: _____

When outdoors, will the pet be: ☐ Chained ☐ Fenced ☐ Unrestrained ☐ Leashed

What type of shelter will be provided? _____

How many hours per day will the pet be left alone? _____