

DOBERMAN RESCUE OF NEW MEXICO Foster Home Application and Agreement

I agree to act as a foster home provider for Doberman Rescue of New Mexico, Inc. (DRNM). I also agree to fulfill and respect the following conditions while acting as a foster home provider:

- The dog will remain the property of DRNM. The dog will be surrendered to a representative of DRNM immediately upon request.
- The dog will be fed, watered, exercised, and will live within the home, unless other living
 arrangements are approved by DRNM. The dog is not to be allowed unsupervised off-lead time
 outside of fenced property of the foster family.
- The foster home will not be compensated for expenses incurred in the normal daily care of the dog; however, veterinary care may be provided by DRNM. This may include vaccinations, heartworm testing and preventative, spay/neuter, and any prescription medications necessary for the dog. Any expenditure incurred by the foster family other than emergency care and treatment require prior approval by DRNM. The foster family will be responsible for unapproved expenditures.
- The dog is to be adopted to its permanent home only under the supervision of DRNM to a family
 pre-approved by DRNM. Adoptive families may be contacted by the foster family to inquire about
 the dog; however, adoptive families are to be given respect and privacy.
- Adoption fees and/or donations connected with the adoption of the dog will be sent directly to DRNM, P.O. Box 26582, Albuquerque, NM 87125.

Any questions or problems regarding this foster care are to be directed to DRNM representatives. If there is need to remove the animal from the foster home, the animal is to be given directly to a DRNM representative.

The foster family accepts responsibility for any and all events that occur in connection with the fostering of a DRNM dog. The foster family agrees to release DRNM from any and all liability claims and responsibility for situations that may arise during the foster care of the dog.

The foster family will evaluate the dog and prepare a written evaluation. This evaluation will be kept with the adoption package as information for the new owners.

Download this form to your PC to complete it. Email to jocruzah@yahoo.com, or mail to:

Doberman Rescue of New Mexico, Inc.	
P.O. Box 26582	
Albuquerque, NM 87125	

First Name	Last Name			
Street Address			Unit, Apa	artment, etc.
City	State	Zip		
Phone number where you can be reached				
Email Address				
Have you applied for fostering or adoption through DRNM before?			Yes	No
If yes, please indicate when				

Occupation	Employer					
Employer Phone	Employer Address					
Employer City	Employer State Employer Zip					
Marital Status: Single Married	Do you have roommates? Yes No					
How many adults in your household?	Age of adults, including yourself?					
How many children in your household?	Age of children?					
What type of home do you live in?						
House Condo/Townho	ouse Duplex/Triplex					
Apartment Mobile Home _	Other					
If Other, please explain						
How long have you lived at your current home?	Years Months					
Do you own or rent? Own Rent						
If you rent, do you have your landlord's permiss	ion to keep a dog? Yes No					
Landlord's Name						
Landlord's Phone	Landlord's Address					
Landlord's City	Landlord's State Landlord's Zip					
If you move to a home where dogs are not allow	ved, what would you do with the dog?					
Do you have a completely fenced yard suitable	for a dog? Yes No					
Do you have a kennel run? Yes No						
If yes to either, please describe the fenced/kennel area (type, height, approximate size)						
If you do not have a fenced yard or kennel run, how will the dog be exercised?						
If you do not have a fenced yard or kennel run,	how will the dog be exercised?					
	how will the dog be exercised?					

How many hour	s per day will the c	dog be left alone?				
Where will the c	log be housed whi	le you are gone?				
Who will be resp	ponsible for the ca	re of the dog?				
Have you ever of	owned a Doberma	n before? Yes	No			
Do you currently	y own any pets? Y	/es No				
lf yes, please lis	st below					
Туре	Breed	Age	M F	Spayed/Neutered Y	N	
Туре	Breed	Age	MF_	Spayed/Neutered Y	N	
Туре	Breed	Age	MF_	Spayed/Neutered Y	N	
Туре	Breed	Age	MF_	Spayed/Neutered Y	N	
Туре	Breed	Age	MF_	Spayed/Neutered Y	N	
Do you have a r	regular veterinariar	n? Yes No	_			
Vet's Phone		Vet's	s Address			
Vet's City		Veťs	s State	Vet's Zip		
Are you prepared to give the dog any needed health care?						
Yes No						
Please describe interact.	e visitors/family tha	t come to your hom	ie, human or a	nimal, with whom the dog will h	ave to	
	festyle. Active					
Will you attend dog obedience classes? Yes No						

What activities do you plan on doing with the dog? Check all that apply.

Companion Agilit	y Guard	_ Therapy	Obedience	Other		
If Other, please give details						
What behavior would cause yo	u to return the doo	g to DRNM?				
Would you be willing to have a DRNM representative visit your home prior to and at least once after a dog is placed in your home for temporary fostering? Yes No						
Please provide 3 personal refe	rences of people t	hat do not live	in your household			
Reference 1						
Name Reference 2	_ Phone		Relationship to ye	ou		
Name Reference 3	_ Phone		Relationship to ye	ou		
Name Phone Relationship to you Do you have any additional comments or information you feel is important to tell us?						

Acknowledgment

The information on this questionnaire will be kept confidential. Please read the paragraph below carefully.

I understand that Doberman Rescue of New Mexico (DRNM) is not responsible for the accuracy of information received about the temperament, habits and physical conditions of dogs available for adoption. I understand that it is my responsibility to see and evaluate the dog for myself before agreeing to foster. DRNM, and any person associated with its temporary fostering program, is in no way liable or responsible for any damage, accident or injury resulting from the placement of a dog into my household. I am in full agreement with these terms of fostering.

By my signature and by selecting to submit this form, I acknowledge that I have read and understand this paragraph.

Sign Name_____

Date_____