

Perfect match

APPLICATION TO FOSTER ANIMALS

Great news; you want to foster for us. We just need to get a few details so we can find the perfect animal for you. Please answer honestly so we find the right match!

A FEW DETAILS ABOUTYOU

TITLE SURNAME
FIRST NAME EMAIL
ADDRESS
POSTCODE
Best telephone number(s) to contact you (We will normally contact you between 9am-5pm Mon-Fri, but it may be the evening if we are busy) WHERE DID YOU HEAR ABOUT US?
☐ Advertisement ☐ Already aware of branch ☐ Referred by owner ☐ Website ☐ Referred by other establishment
☐ Just passing ☐ Word of mouth ☐ NCC/RSPCA enquiries ☐ Other (please state where)
YOU ARE INTERESTED IN FOSTERING?
☐ Single cat ☐ Pair of cats ☐ Either
Age of cat ☐ Kitten ☐ Less than 2 years ☐ 2-5 years ☐ 5-8 years ☐ 8 years + ☐ Any
Gender of cat □ Male □ Female □ Either
\square Single dog \square Pair of dogs \square Either
Age of Dog □ Puppy □ Less than 2 years □ 2-5 years □ 5-8 years □ 8 years + □ Any
Gender of Dog □ Male □ Female □ Either
☐ Single Rabbit ☐ Pair of rabbits ☐ Either
Age of Rabbit
Gender of Rabbit □ Male □ Female □ Either
☐ Single Guinea pigs ☐ Pair of Guinea pigs ☐ Either
Age of Guinea pigs Less than 2 2-5 years 5-8 years 8 years + Any
Gender of Guinea pigs □ Male □ Female □ Either
Any other animals: (Please state age, gender and quantity of preference)

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A LITTLE BIT ABOUT YOUR HOME:				
Do you: \[\sum \text{Own} \text{Rent} \] If you rent, have you got written permission from your landlord? \[\sum \text{Yes} \text{No} \] What provision do you have for allowing the animal outside (if applicable)? (e.g. dog flap, letting out through door - please note foster cats will not be allowed out)				
Do you have a garden? ☐ Yes ☐ No ☐ Communal				
A LITTLE BIT ABOUT YOUR FAMILY:				
Who lives at home? Adults Children Children's ages				
Any visiting children?				
Frequency of visits \square Daily \square Weekly \square Monthly \square Annually				
Do you own other pets?				
Are they neutered?				
Have all members of your family been in contact with animals before? If so, please state what: (This is to rule out allergies.) Do you have any visiting animals (e.g.				
family/friends' cats and dogs)? If so, please give details:				
A LITTLE BIT ABOUT YOUR LIFESTYLE:				
How long do you expect to leave the animal alone on a regular basis? hours				
Is this: Daytime ☐ Evening ☐ Night time ☐ How often?				
Are you planning any of the following? \Box Moving house \Box Holiday in the next few weeks				

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YOUR IDEAL ANIMAL WOULD:					
Be good with dogs	☐ Very important	☐ Quite important	☐ Not important		
Be good with other animals	☐ Very important	☐ Quite important	☐ Not important		
Be litter-trained	☐ Very important	☐ Quite important	☐ Not important		
Be comfortable around children	☐ Very important	☐ Quite important	☐ Not important		
Enjoy being picked up/petted	☐ Very important	☐ Quite important	☐ Not important		
Enjoy playing with toys	☐ Very important	☐ Quite important	☐ Not important		
I am a first time fosterer	☐ Yes ☐ No				
Signature			Date		
	ur fundraising activities, \square Telephone \square Email \square		ch you can support us to help animals. Tell us how you		
whose privacy policy is available and pul	blished at: www.rspca.or lied directly to the natio	g.uk/privacy or on requental RSPCA (charity number	Royal Society for the Prevention of Cruelty to Animals est by calling Supporter Services on 0300 123 0346 This er 219099), as data controller, or is shared with us by an "will refer to both data controllers."		

Whilst every care is taken to find the right foster animals for you, we cannot guarantee behaviour.

Please take/post this form to:

RSPCA East Norfolk Branch, Tarworks Road, Great Yarmouth, NR30 1QR or email to animals@rspcaeastnorfolk.org.uk

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