Livingston County Animal Shelter
418 S Highlander Way, Howell MI 48843
(Phone) 517-546-2154 (Fax) 517-546-0232
https://milivcounty.gov/animalshelter
LCAC@livgov.com

LCAS's Foster Application

The purpose of the Foster Application and registration process is to determine the qualifications and suitability of individuals who wish or desire to become registered foster parents with the Livingston County Animal Shelter (LCAS).

Incomplete applications will not be reviewed. Applications submitted with false information will be disqualified.

Every applicant must comply with the Foster Program of the LCAS.

The person filling out the foster application must be 18 or older and will be considered the primary caretaker of the foster animal(s). Other family members and roommates are invited to help with the foster pets, and they can be any age.

Foster homes need to have reliable transportation in order to bring their animals to and from appointments at the shelter.

Only certain animals at the shelter are looking for foster homes. Most of the animals looking to go to foster care are not yet available for adoption and often have some sort of behavioral or medical need that could be better managed in a home environment.

Animals in foster care are the property of LCAS.

About you:

Name: _____ Date of Birth: _____

Address: _____ City: _____ Zip: _____

Phone Number: _____ Email Address: _____

What is the best way to contact you? _____

Driver's License Number: _____

What type and how many animals are you interested in fostering?

Type	Cats/Dogs	Yes/No	Number of
Adoptable	Select Below	Select Below	
Orphaned infants	Select Below	Select Below	
Mothers with infants	Select Below	Select Below	
Medical issues	Select Below	Select Below	
Behavior/Socialization	Select Below	Select Below	

About your home:

Do you live in a Select Below _____ Other Desc: _____

Do you rent or own? Select Below _____ Landlord name: _____

Contact info: _____

List current occupants of the home:

Name	Age

Where will the foster animal be kept in the home? _____

Where will the foster animal be kept when you have to leave? _____

How many hours will the pet be left alone? _____

How do you plan to manage/contain a foster dog when outdoors? _____

List your current pets at home:

Name	Species	Breed	Age	Altered?	Vaccinated?	Indoor/outdoor
	Select Below			Select Below	Select Below	Select Below
	Select Below			Select Below	Select Below	Select Below
	Select Below			Select Below	Select Below	Select Below
	Select Below			Select Below	Select Below	Select Below
	Select Below			Select Below	Select Below	Select Below
	Select Below			Select Below	Select Below	Select Below

We ask that all resident adult dogs and cats are up to date on their Rabies vaccine, and we highly recommend that they are current on other common vaccines (distemper, Bordetella) and flea, tick, and heartworm preventatives. LCAS provides vaccines and preventatives to all of the shelter animals, but cannot examine or treat foster's personal pets. To further avoid the spread of potential disease, we recommend that a foster has a separation plan in place when bringing a new animal home so that it can be monitored and gradually introduced to the resident pets. This is to keep both your own pets and the foster animals safe and healthy!

All Foster Parents:

I _____, attest that all the information I have provided on this application is true. I agree to honor the rules and regulations listed in the Foster Program.

I _____, agree that if my foster animal is requiring medical attention, I will notify LCAS before taking the animal(s) to the vet. Any animal that does not have pre-approval for a veterinarian visit **will not** be paid for by LCAS.

I _____, agree that I will not hold LCAS accountable for any direct or remote and consequential damages or injuries arising out of this foster care arrangement.

I _____, have read, understood, agree to, and will abide by all terms and conditions outlined in the Foster Program.

I _____, take responsibility for the health of my own animals residing in the home and will provide them with all recommended preventative care (vaccines, de-wormer, flea prevention).

For the safety of both resident and foster animals, we ask that you email or fax a copy of your vaccination records for all resident dogs, cats, and ferrets to confirm their Rabies Vaccine before you will be able to foster LCAS animals.

Email: LCAC@livgov.com fax: 517-546-0232

I _____, acknowledge that my foster application will not be processed until LCAS has received a copy of my pets' vaccination records.

Signature: _____ Date: _____

LCAS Staff Use:

Petpoint:_____

_____

Property:_____ Landlord:_____

Vet records: _____

Added to: PetPoint Foster Phone Facebook Page

Notes:

Print & Clear