Nine Lives of Norton Feline Rescue Shelter Inc;
Foster Parent Application

NINE LIVES OF NORTON IS A NON-PROFIT, NO-KILL, ALL VOLUNTEER FELINE RESCUE SHELTER. OUR FOSTER CARE PROGRAM IS AN IMPORTANT STEP IN PREPARING CATS/KITTENS FOR THEIR FOREVER HOMES. BELOW ARE THE GUIDELINES FOR BECOMING A FOSTER PARENT.

NAME:_____PHONE:_____DATE:_____

STREET:_____CITY:_____STATE:_____ZIP:_____

PLEASE INITIAL EACH LINE AFTER YOU HAVE READ IT TO AGREE TO FOLLOW THE SET GUIDELINE:

OWN HOME ☐ (PROOF OF OWNERSHIP; EX.-TAX BILL) RENT HOME ☐ (LETTER FROM LANDLORD NEEDED WITH CONTACT INFORMATION)

_____ALL FOSTER PARENTS MUST PROVIDE VET REFRENCES BEFORE RECEIVING THEIR FOSTER CAT/KITTEN.

VETERNARIANS NAME:_____

ADDRESS/PHONE:_____

_____NINE LIVES OF NORTON WILL PROVIDE ALL NEEDED SUPPLIES OF FOOD, LITTER, CAGE, MEDICINE, AND MEDICAL TREATMENT TO THE FOSTER HOME. FOSTER CAT/KITTEN WILL RESIDE IN A CAGE WHILE IN YOUR HOME. IF YOU DO NOT HAVE A CAGE, NINE LIVES WILL LEND YOU A CAGE TO USE. WILL YOU NEED A CAGE? YES ☐ NO ☐

_____OUR FOSTER PROGRAM IS NOT AN ADOPTION PROGRAM, ALL CATS/KITTENS IN FOSTER CARE ARE UP FOR ADOPTION. FOSTER PARENTS ARE RESPONSIBLE TO BRING IN CATS/KITTENS THAT ARE READY FOR ADOPTION TO THE SHELTER ON SATURDAYS FOR ADOPTION HOURS. CAT/KITTENS ARE TO BE DROPPED OFF BY 11AM AND PICKED UP AT 4PM.

_____FOSTER PARENTS MUST BRING IN THEIR CATS/KITTENS TO THE SHELTER FOR VET DAY. OUR VET GENERALLY COMES IN ONCE A MONTH IN THE MORNING. IF YOUR FOSTER IS SCHEDULED TO BE SEEN BY THE VET, THE MEDICAL DIRECTOR WILL CALL YOU BEFORE VET DAY AND LET YOU KNOW THE DAY AND TIME.

_____FOSTER PARENTS ARE RESPONSIBLE FOR THE SAFETY OF THE CATS/KITTENS THAT ARE IN THEIR HOMES. ALL CATS/KITTENS MUST BE KEPT INDOORS AT ALL TIMES, NO EXCEPTIONS. ANY MEDICAL CONCERNS MUST BE BROUGHT TO THE MEDICAL DIRECTORS ATTENTION IMMEDIATELY. PERIODIC HOME CHECKS MAY BE DONE BY THE MEDICAL DIRECTOR.

_____MANY OF THE CAT/KITTENS IN OUR FOSTER CARE PROGRAM HAVE NOT BEEN IN A HOME BEFORE, THEY ARE IN FOSTER CARE TO PREPARE THEM FOR THEIR FOREVER HOMES. THEY NEED SOCIALAZATION, LOVE AND CARE. WE ALSO NEED FOSTER HOMES FOR OUR SPECIAL NEEDS CAT/KITTEN, THESE FOSTERS MAY REQUIRE MEDICATION AND CLOSE MONITORING. ARE YOU INTERESTED IN FOSTERING CAT/KITTEN WITH SPECIAL NEEDS? YES ☐ NO☐

_____I UNDERSTAND THAT BY SIGNING THIS FORM, I ABSOLVE NINE LIVES OF NORTON FELINE RESCUE SHELTER OF ANY RESPONSIBILITY FOR ANY PERSONAL DAMAGE OR PERSONAL INJURIES THAT MAY OCCUR FROM FOSTER CATS/KITTENS THAT ARE IN MY HOME OR SHELTER. I UNDERSTAND THAT CATS/KITTENS MAY SCRATCH AND/OR BITE AT ANY TIME, NOT ONLY WHEN THEY ARE FRIGHTENED.

FOSTERS SIGNATURE: _____DATE: _____

MEDICAL DIRECTORS USE ONLY:
VET REFRENCES CHECKED BY: _____DATE:_____
APPROVED ☐ DISSAPPROVED ☐