TORONTO HUMANE SOCIETY

WILDLIFE REHABILITATION

FOSTER PROGRAM APPLICATION

NAME _____ ADDRESS _____

TEL: HOME:_____WORK:_____ _____PC_____

1 WHY ARE YOU INTERESTED IN THE WILDLIFE FOSTER CARE PROGRAM?_____

_____

2. PLEASE LIST ANY EXPERIENCE IN WILDLIFE CARE IF ANY:_____

_____

3. DO YOU HAVE ACCESS TO CAGES OR HOUSING FOR WILDLIFE? (PLEASE DESCRIBE)_____

_____

4. DO YOU HAVE ANY PETS AT PRESENT? (PLEASE LIST)_____

ARE YOUR PETS UP TO DATE ON THEIR YEARLY VACCINES? YES☐ NO☐

ARE THEY SPAYED/NEUTERED? YES☐ NO☐ NOT APPLICABLE☐

DO YOU HAVE AN AREA IN YOUR HOME WHERE ANIMAL(S) CAN BE ISOLATED FROM HOUSEHOLD PETS?

YES☐ NO☐ IF YES, PLEASE DESCRIBE:_____

_____

DO YOU HAVE CHILDREN? YES☐ NO☐ IF YES, HOW MANY? (PLEASE INCLUDE AGES)

_____

WILL YOUR CHILDREN HAVE ANY INVOLVEMENT WITH THE ANIMALS IN YOUR CARE? (PLEASE DESCRIBE HOW THEY WILL BE INVOLVED)_____

_____

IS THERE SOMEONE HOME DURING THE DAY? YES☐ NO☐ SOMETIMES☐

10. DO ANY MEMBERS OF YOUR HOUSEHOLD HAVE ALLERGIES OR FEARS TOWARD ANIMALS? (PLEASE LIST AND EXPLAIN)_____

11. HOW MUCH TIME ARE YOU WILLING TO COMMIT TO FOSTERING WILDLIFE?

1-2 WEEKS☐ 2-4 WEEKS☐ 4-6 WEEKS☐ 6 WEEKS OR MORE☐ OTHER☐ _____

12. DO YOU HAVE ACCESS TO A VEHICLE? YES☐ NO☐

13. DO YOU HAVE ACCESS TO A HEATING PAD? YES☐ NO☐

14. ARE YOU WILLING TO LET A REPRESENTATIVE OF THE TORONTO HUMANE SOCIETY VISIT YOUR HOME AT YOUR CONVENIENCE? YES☐ NO☐

15. DO YOU HAVE PROPERTY SUITABLE FOR RELEASE? (PLEASE DESCRIBE)_____

_____

16. IS THERE SOMEONE ON THIS PROPERTY DAILY? YES☐ NO☐

17. DO YOU HAVE OUTDOOR CAGES OR LARGE CAGES WHICH MAY BE MOVED OUTSIDE? YES☐ NO☐

IF YES, PLEASE DESCRIBE:_____