



Sammie's Friends
14647 McCourtney Road
Grass Valley, CA 95949
(530) 471 5041 info@sammiesfriends.org
www.sammiesfriends.petfinder.com
www.sammiesfriends.org

PREFOSTER QUESTIONNAIRE

Date: _____ Time: _____ Pet Name(s) _____

1. Name: _____ Home Phone: _____

2. Driver's License: _____ Work Phone: _____ Cell Phone: _____

3. Address: _____ City: _____ Zip: _____

4. Do you own your home: yes no Landlords name and phone _____

5. How many adults in your household? _____ Children: _____ Ages of children: _____

6. Have you fostered animals before? _____ What kind? _____

7. Will this animal be alone during the day? _____ Please explain _____

8. What pets live in the household? _____ Where do they live and sleep? _____

9. Are your pets current on their vaccines: _____

10. Are you willing to keep windows closed for the duration of foster? _____

12. Where will this FOSTER pet live during the day: _____ At night: _____

13. Sammie's Friends foster cats should not come in contact with any other animals for at least 2 weeks. Can you keep your foster animals safe/away from your animals? _____

14. Who is your vet: _____ May we contact your vet? Yes No

15. Who will be the primary caregiver for the Foster? _____

16. What kind of animal can you foster? (circle)

Adult Cat—Kittens—Bottle Kittens—Semi-Ferals for socialization— Mom & Kittens

17. Are you confident you can keep your fosters indoors at all times? _____

I understand that when the Foster Animal is ready to be adopted, I will bring it back to Sammie's Friends for placement. All foster animals are the property of Sammie's Friends and adoptions must be done through Sammie's Friends. All placements are subject to regular adoption guidelines, and all fees apply. Foster parents are encouraged to assist in the placement process, but we ask that you send people to the shelter to do the paperwork and that the animal stays in your care until adoption has been complete. Foster kittens will need to return to the shelter for vaccinations, weighing, and de-worming every 2 weeks. If you have any questions, please call the cat facility at (530) 274-1955.

Signature _____ Date _____

Application Received By _____ Date _____

Reviewing Staff Member _____ Date _____

Approved Yes ___ No ___ Pending Comments _____