



**Spay &  
Neuter  
Abandoned  
Cats &  
Kittens, Inc.**

Spay & Neuter Abandoned Cats & Kittens, Inc.  
P.O. Box 121  
Sunbury, OH 43074-0121

Website: [www.snackohio.org](http://www.snackohio.org) E-mail: [info@snackohio.org](mailto:info@snackohio.org)

---

Thank you for your interest in fostering SNACK, Inc. cats/kittens. Without your help, it would be impossible to socialize these feral kittens and they would return to the feral colony. Your help enables us to attempt to find permanent, loving homes for these animals.

Please complete the application fully and when you have finished, click the send button. If you have questions, please email us at [info@snackohio.org](mailto:info@snackohio.org):

### **YOUR INFORMATION**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip Code:** \_\_\_\_\_

**Phone number where you can be reached easily:** \_\_\_\_\_

**Are you at least 21 years of age?** \_\_\_\_\_

**Employment/Occupation:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**What is the best way to contact you?** \_\_\_\_\_

**What is the best time to contact you?** \_\_\_\_\_

### **YOUR HOME**

**Do you rent or own your home? Rent** \_\_\_\_\_ **Own** \_\_\_\_\_

**If you rent, are you allowed to have pets? Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**If you rent, please provide your landlord's name and phone number:** \_\_\_\_\_

\_\_\_\_\_

**Number of Persons in your household:** \_\_\_\_\_

**Number of children in household:** \_\_\_\_\_

**Ages of children, if applicable:** \_\_\_\_\_

## REFERENCES

Please list the names and telephone numbers of three references, including your veterinarian if you have pets. Other references can include your landlord, if applicable, friends, relatives, or business associates.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

## CURRENT PETS

Please list your current pets

Cat/Dog/Other  
vaccinations

Spayed/Neutered

Date of

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Name and phone number of your current veterinarian: \_\_\_\_\_

\_\_\_\_\_

If you have pets, we would ask you to keep your pets separate from the fosters.

## CARE AND RESPONSIBILITY

If you foster SNACK, Inc. cats/kittens, we will provide routine and emergency veterinary care through designated veterinarians. Fosters are NOT to be treated by unauthorized veterinarians except in cases of extreme emergency. Expenses incurred from unauthorized veterinarian care will be the responsibility of the foster parent.

Have you ever fostered animals for a humane organization or animal shelter?

Yes \_\_\_ No \_\_\_

If yes, which group (s) and when? \_\_\_\_\_

Why do you want to foster for SNACK, Inc.? \_\_\_\_\_

\_\_\_\_\_

September 2011

**How long are you willing to keep foster kittens?**\_\_\_\_\_

**Are you able to give medications? Yes**\_\_\_ **No**\_\_\_

**If yes, pills?** \_\_\_ **Liquids?**\_\_\_ **Injections?**\_\_\_

**Please explain where you will keep the foster cats/kittens.**\_\_\_\_\_

\_\_\_\_\_

**Are you willing to take fosters to a SNACK,Inc. designated veterinarian for treatment and vaccinations? Yes** \_\_\_ **No**\_\_\_

**Any other information/comments?**\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**All of the information that I have provided above is true and complete to the best of my knowledge. If kittens or cats are placed with me, I will provide adequate food, water, shelter, affection, and medical care.**

\_\_\_\_\_

**Signature of applicant**

\_\_\_\_\_

**Date**

Thank you for taking the time to complete this application. Once we have received it, our foster care coordinator will contact you within a few days.

September 2011