## Sangamon County Department of Public Health Animal Control & Adoption Center 2100 Shale Rd. Springfield, IL 62703

## 217-535-3065 FOSTER APPLICATION

All individuals residing in a household must be alerted to the fact the animal is being fostered prior to finalization of the foster agreement. Please answer each question completely. Additional space is available on the back.

## PLEASE PRINT

Nar	meLast	Firs	st.	M		For office	use only	
Ado	dress					Cage		
City State Zip						Animal Name		
Cou	inty		Occurrence #					
	e(must be 18)ail			_		Date/Time		
1.	Do you currently  If renting or living with fric	□rent	□о	wn	live with re	elatives or friends		
	in the home. Refusa	_		-				
	Landlord/homeowr	ner:		·		Phone	e:	
2.	Do you currently h	ave other pets?	es, please pr	provide the following for each pet:				
	Name	Breed	Age	Spayed or neutered	Male or Female	Vaccinations Current?	Registered with Sangamon County	
-	Are you currently f	ostering for any	other res	ques or shelter	re? \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	No If wes please	e evnlain:	
	Are you currently i	ostering for any	other res	edes of sheller		No 11 yes, picasi	с схріані.	
3.	Do you have children that reside in your home? □Yes □No  If yes, How many under 18? Please list their ages							
4.	If you have other pets, have they ever been impounded at our facility? $\Box$ Yes $\Box$ No If yes, please explain:							
5.	Have you ever been issued a citation for violation of an Animal Control Ordinance? □Yes □No If yes, please explain:							
5.	Have you ever viol animals? □Yes □			~		-		

2 (continued).

Breed	Name	Age	Spayed or neutered	Male or Female	Vaccinations Current?	Registered with Sangamon County
3 (continued):						
, ,						

_	(
4	(continued):
5	(continued):

I certify that the information I have provided here is true to the best of my knowledge. I understand that Sangamon County Animal Control may check civil and criminal records to verify my past compliance with all pertinent laws and regulations. I also acknowledge falsification of the above may result in my being denied as a foster agent or, if an animal has been fostered by me, the return of that animal to Sangamon County Animal Control. I give my permission for agents of Sangamon County Animal Control to contact my veterinarian to obtain information contained within my pet(s) records.

In consideration for being permitted to foster an animal of the Animal Control & Adoption Center, the Foster Agent agrees he/she shall hold Sangamon County, Animal Control & Adoption Center, their officers, agents and employees, harmless from any and all claims, actions, costs, expenses, attorney's fees, other fees, damages, and judgments asserted against or in any incurred by the County and Animal Control & Adoption Center, their officers, agents, and employees, by reason or any injury or illness suffered by the Foster Agent while assisting the Animal Control & Adoption Center. The Foster Agent further agrees that any and all information obtained while acting as a Foster Agent for the Animal Control & Adoption Center shall remain confidential.

Signature	Date	
Signature	Date	