



# Eve's Sanctuary - Animal Rescue

## ADOPTION / FOSTER / VOLUNTEER APPLICATION

*“Save a life. Adopt a rescue animal today!”*

Founded in 2004, Eve's Sanctuary is an independent, no-kill, non-profit, all volunteer, animal rescue organization based in New York City.

Applicant Personal Information		
<b>First Name:</b>	<b>Last Name:</b>	
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>
<b>Occupation:</b>	<b>E-mail address:</b>	
<b>Cell Phone:</b> <i>(Include area code)</i> (     )     -	<b>Home Phone:</b> <i>(Include area code)</i> (     )     -	
<b>Work Phone:</b> <i>(Include area code)</i> (     )     -	<b>How did you hear about us?</b>	<b>INTERVIEWED BY:</b>
<i>Identification checked:</i>		
<i>Please circle one from each below &amp; note yes or no in response to the following question:</i>		
<b>Wish to: ADOPT / FOSTER / VOLUNTEER ----- DOG / CAT</b>		
<b>Wish to Foster with option to adopt?</b>		
Vet Information:		
Please provide the name and phone number of your current Veterinarian. Please let your vet know we may call and that they are free to speak about your animals and their veterinary history.		
If you do not have a veterinarian we request that you locate one and provide a statement to that effect as well as a vet reference from a previously used veterinarian, if possible.		
Family Information:		
<b>Children Living in Household</b> <i>(please include number and ages):</i>		

**All pets owed and/or fostered (past and present):**  
*(please list current & previous pets--use additional space if needed)*

**Animal  
 Name  
 Age  
 Yrs Owned  
 Where is this pet now?  
 If animal is deceased, how?**

**PRESENT:**

**PAST:**

**Please attach a page with additional animals owned if there is not enough room on this form.**

**Are your dogs/cats up to date on vaccines?**

**Are your dogs/cats spayed/neutered?**

**If not, why not?**

**Have you ever had a cat declawed or a dog debarked?**

**Cats at home – Have they been tested for Feline Leukemia & FIV?**

**Test Results:**

**Dogs at home – Have they been tested for Heartworm / Lyme?**

**Test Results:**

**Do your animals ever go outside? \_\_\_YES \_\_\_NO**

**Do you have screens on ALL your windows?**

**Please explain:**

**Home Situation (Own/Rent): \_\_\_\_\_**

**How many years at current residence? \_\_\_\_\_**

**Is building pet friendly? \_\_\_\_\_**

**Do you anticipate staying at this address? \_\_\_\_\_**

**I live in a: \_\_\_House \_\_\_Condo \_\_\_Apartment \_\_\_Co-op \_\_\_RV / Mobile Home**

**I: \_\_\_live alone \_\_\_live with partner \_\_\_live with parents or relatives \_\_\_live with roommates**

**Landlords Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_**

**How many hours a day will this animal be left alone? \_\_\_\_\_**

**Where will the animal be kept when alone? \_\_\_\_\_**

**Who primarily is responsible for the pet? \_\_\_\_\_**

**Where is the pet to be kept during the day? \_\_\_\_\_**

**And at night? \_\_\_\_\_**

Do you travel often?  YES  NO

If so how do you provide for them while you are away? \_\_\_\_\_

What will happen to this pet in case of emergency while you are away? \_\_\_\_\_

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To feed, license, provide medical care, bedding, & toys: I anticipate spending (check one) per month.  
 \$50  \$100.00  \$200.00  \$300.00  OTHER \_\_\_\_\_

If the pet were to become injured or ill what would you do? \_\_\_\_\_

What would you do if treatment was expensive? \_\_\_\_\_

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Have you or any member of your family or household had a history of allergies or asthma?

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What will you do if the new pet does not get along with present pets?

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Have you ever turned an animal over to a shelter / rescue group or given up a pet for any reason?  
 If yes please explain: \_\_\_\_\_

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*Are you familiar with the laws and ordinances of your city:*

County/State on: Licensing?  YES  NO      Number of pets allowed?  YES  NO

Leash requirements?  YES  NO

Laws, ordinances, and or restrictions against certain breeds or types of animals?  YES  NO

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Why do you want to foster / adopt / volunteer?

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What breed(s) are you looking to foster / adopt? \_\_\_\_\_

Do you have any breed specific experience (grooming, care, behavior): \_\_\_\_\_

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Describe your ideal animal companion:

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Age desired:	Sex desired:	Color desired:
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Two References (Not Related):		
Name:	E-mail:	Phone: (    )    -
Name:	E-mail:	Phone: (    )    -

**Note:** Please provide complete, accurate information. Email addresses for references may expedite processing of your application. Please inform your references that they will be contacted. Applications are processed as expeditiously as possible on a first in, first processed basis. We do accept emailed applications but they must be followed up by receipt of a signed, initialed version in person or by mail.

Initials \_\_\_\_\_

*Please also note your agreement with and awareness of our policies and your responsibilities by checking the boxes below prior to submitting your application:*

- By checking this box, I agree to abide by all local animal ordinances, leases, and property ownership agreements as they pertain to the legally defined number of pets allowed in any human domicile or associated/attached properties. I further agree that, should I be in violation of any local animal ordinances, leases, and property ownership agreements pertaining to the number of animals allowed, I hold harmless Eve’s Sanctuary Animal Rescue, and all associated Rescue organizations in all matters, and assume all legal and/or financial liabilities pertaining to any violations of said ordinances, leases, and/or agreements.**
- I will tell my veterinarian that Eve’s Sanctuary Animal Rescue may be calling for a recommendation and that they have my permission to speak freely. If I rent, I will tell my landlord or management company to expect a call, as well.**
- Yes, I understand that if my breed preference is a breed that has a recognized formal rescue group of it’s own that works cooperatively with Eve’s Sanctuary Animal Rescue, the information in this application may be provided to that breed rescue group to facilitate signing up to foster with that group.**
- Yes, I understand that a home visit evaluation is required prior to my application being approved and/or during the foster.**
- I have read the Eve’s Sanctuary Animal Rescue Foster Contract and agree to return a signed copy, as requested, should I be accepted as a Eve’s Sanctuary Animal Rescue foster.**

Understanding that a Rescue houses animals from unknown backgrounds, I assume the risks of being bitten, scratched, injured, or frightened by the animals in connection with my visits to an Eve’s Sanctuary Animal Rescue foster home or in connection with providing foster for Eve’s Sanctuary Animal Rescue. I agree that Eve’s Sanctuary Animal Rescue is not liable to me for any injuries, damages, liabilities, losses, judgments, costs or expenses whatsoever, which I might suffer or sustain in connection with my visits to a Eve’s Sanctuary Animal Rescue foster home or by becoming a foster home.

***I certify the above to be true and complete to the best of my knowledge.***

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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

**Date:** \_\_\_\_\_

***Please sign and date this form, initial every page, and return it in person to an adoption coordinator***

Internet request applications may be returned via email to the following address:

**[AMBER@EVESSANCTUARY.COM](mailto:AMBER@EVESSANCTUARY.COM)**

**Transportation restrictions may apply in many instances, so in order to minimize the stress on the animal we suggest you focus on the animals closest to you.**