Submit Application to volunteerksh@gmail.com

Kimmy’s Safe Haven

**RESCUE ADOPT SAVE**

**ADOPTION/FOSTER APPLICATION**

(Circle one)

Kimmy’s Safe Haven Rescue is a non-profit organization. All fees will reflect on the animal and their basic medical expenses. Remember when adopting a new pet, it will take time to adjust with your new furry friend.

You should give serious thought before adopting an animal.

You are a pet’s lifelong commitment!

NO REFUNDS WILL BE ISSUED. If you adopt a pet and decide it doesn’t work out, your adoption fee will go towards helping other animals that are in need.

Donation fees:

Kittens (Under 1 year old) $100.00

Cats (Over 1 year old) $50.00

Dogs $275.00-$525.00 (transport fees)

Kitten Cat Dog Rabbit

(CIRCLE)

Male/Female

Name: Description/Colors/Marks: Age:

**Includes:**

**Dogs: Spay/Neutered, Flea tick meds, rabies, distemper, heartworm, and microchip**

**Cats/Kittens: Spay, Neutered, rabies, distemper, FIV Combo.**

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

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: City: State \_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (Home)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (Cell)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe your home: House Apartment Other:

Do you: Rent/Own

If renting are you allowed or have pets? Yes/No

Please provide your landlords name and phone number:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list Family Members Name and ages Living in the house.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you have children, what is their experience with Animals?

Is anyone in the house allergic to animals? \_\_\_\_\_\_\_\_\_\_\_\_\_ Yes/No

Do you currently have any pets? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Yes/No

If yes, please list what kind of pet(s):

Are they up to date on vaccinations? Yes/No

Do they go for an annual Vet visit? Yes/No

Employment Information:

Work from Home? Yes/No

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State: \_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Work)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you plan to microchip your pet? Yes/No

Are you committed to providing a safe and loving home for the next 12+ years of your pet’s life? Yes/No

Have you ever had to give up a pet? Yes/No

If yes, Why?

Are you financially prepared to take care of your pet if an emergency comes up ($200-$800 or more?) Yes/No

Often Rescued animals have been through some issues and trauma. Do you feel if any behavioral situations arise, will you be able to handle them? Yes/No

FOSTER ONLY:

Why do you want to foster?

Do you have a fenced in yard? Yes/No Height?

Are you willing to house train? Yes/No

Are you willing to bring your foster to events? Yes/No

Are you willing to take your foster to vet appointments? Yes/No

Must provide 4 references. **NO** Family members & one must be of the Vet you use/will use.

References:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For Rescue Use Notes:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For Rescue Use Notes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Veterinarians’ Name: Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For Rescue Use Notes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Kimmy’s Safe Haven Pet Contract

I, am Fostering/Adopting the following animal:

Named:

1. I will not give or sell the adopted/fostered animal to anyone or any other agency.
2. I will allow Kimberly brown or another representative to visit my home before or after I foster/adopt. The animal can be revoked at such time if the environment is not found to be appropriate at time of inspection.
3. I agree to provide the animal I am Adopting with Food, Shelter, Water, annual check-ups, shots when needed and medical treatment.

a. Fosters Must Notify Kimberly Brown/Kimmy’s Safe Haven Immediately if the animal needs medical treatment.

1. I agree to license my animal as required by local law (Adopter Only)
2. I agree to Keep my cat indoors, and I will not declaw my cat.
3. I will notify Kimmy’s Safe Haven/Kimberly Brown of any changes in my address.
4. If the animal is not neutered/spayed at time of adoption, I will get the animal that I’m adopting spayed/neutered when age appropriate.
5. Should my pet exhibit any symptoms of illness, I will contact my vet immediately and follow their advice.
6. I agree not to sell the pet I’m adopting/fostering to any person or another agency.

*By signing this Adoption/Foster Contract with Kimmy’s Safe Haven Rescue, I am aware:*

* + *Children and animals must be closely supervised when interacting. An animal’s behavior can change when he or she moves into a new environment and or human actions.*
  + *I understand that the adoption fee is a DONATION and is NON-REFUNDABLE unless the pet has been seen by a veterinarian and is deemed medically unsuitable for adoption at the time of placement.*
  + *I the adopter, hereby accept possession, legal guardianship and responsibility of the animal I am adopting from Kimmy’s Safe Haven Rescue. (ADOPTION ONLY)*
  + *I the Foster understand that even though the Fostered animal is in my possession, that Kimmy’s Safe Haven Rescue is the legal owner until and adoption is finalized. The rescue will be responsible for all medical expenses and can help with supplies. (FOSTER ONLY)*

This contract shall constitute a Legal and Binding agreement between Kimmy’s Safe Haven and the other listed parties (Foster or Adopter) and those signatures affixed to this document. If in any way this

contract is breached; Kimmy’s Safe Haven Rescue will take action to recover the Adopted/Fostered animal and will prosecute to the fullest extent of the law. We act in the best interest of the animals.

Applicants Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Submission Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Kimmy’s Safe Haven Rep: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Approval Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_