



GOLDEN BOND RESCUE  
A 501c(3) Corporation  
[www.goldenbondrescue.com](http://www.goldenbondrescue.com)

## **FOSTER APPLICATION/AGREEMENT**

**Please note, the Foster Program is not intended for fostering-to-adopt.** Thank you for taking the time to fill out this application. Please answer the questions in this application with your ultimate goal in mind: fostering a rescued Golden. Required answers are marked with an asterisk (\*). If a question does not apply to you, please write N/A in the response area. Please fill out this form completely and clearly. Please include area codes with all phone numbers, and please include your E-mail address, if at all possible. One of our representatives will be contacting you shortly after we receive your application.

**Mail your completed Foster Home Application to:**

Fostering Application  
Golden Bond Rescue  
PO Box 25391  
Portland, OR 97298

NOTE: Postage is a minimum \$1.30 to \$1.50 to mail this application. Please be sure you have the correct postage. The Post Office will return envelopes requiring additional postage, holding up your application. **We do not accept applications sent by email or FAX.**

## BASIC CONTACT INFORMATION

**Your Name: \***

First Name

Last Name

**Age: \***

**Second Applicant's Name:**

First Name

Last Name

**Age:**

**Relationship:**

Spouse

Partner

Roommate

Other

**Address: \***

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

**Home Phone: \***

**Cell Phone:**

**Work Phone:**

**E-mail address:**

**Fax Number:**

**Best way to reach you?**

Home Phone

Cell Phone

Work Phone

E-mail

**Your occupation: \***

**Second applicant's occupation:**

**Why do you want to foster? \***

**Best time to contact you:**

## ABOUT YOUR HOUSEHOLD

**Are there any other residents in the house? \***

YES

NO

**Name/Relationship:**

**Are all residents in agreement about fostering? \***

YES

NO

We require in-home visits with all residents of the household present before we can place a foster in your care.

**Best time for home visit?**

Please list all children under 18 that live in your household or visit on a regular basis:

**Resident or visiting children**

	Child 1	Child 2	Child 3	Child 4
Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Boy or Girl	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Age	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dog experience (Y/N)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Resident/Visiting (R/V)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**How will you supervise children while around the foster dog? Please be specific.**

**What responsibilities will the child have in caring for the foster dog?**

**Do you currently have a dog or any other pets living in your house or on your property? \***

YES

NO

Please list all pets that you currently have in your house or on your property, or who regularly visit your home:

**Resident or visiting pets**

	Pet 1	Pet 2	Pet 3	Pet 4
Pet's Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Animal Type (dog, cat, etc.)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Breed	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender (M/F)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Age	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Spayed/Neutered (S/N)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Resident/Visiting (R/V)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Have any of your current dogs shown aggression towards another dog or people? \***

- YES                       NO                       N/A

**If YES explain:**

**What brand and how much food does your dog(s) currently eat and how often is he/she fed?**

**Where will the foster dog sleep at night?**

**Foster dogs are not allowed on furniture as that should be a decision left up to the adopters.**

**How does your current dog(s) react when a strange dog comes onto their property?**

**Are all of your current pets up to date on rabies, distemper series, and bordatella vaccines? Canine influenza vaccine is strongly recommended. \***

- YES                       NO                       N/A

**Do your current pets get a flea preventative?**                       YES  NO

**Please list the special needs or health situations of any current pets:**

## ABOUT YOUR HOME

**What type of home do you live in? \***

- Own home    Rent home    Condo/Townhouse  
 Apartment    Mobile home    Other

**How long have you lived at your present address (years, months)?**

**If you rent, do you have the permission of your landlord to keep a dog over 50 lbs?**

- YES    NO

You must provide written approval/permission from your landlord before your application will be processed. You may attach a document file below or mail your landlord approval letter to:

Fostering Application  
Golden Bond Rescue  
PO Box 25391  
Portland OR 97298

**Landlord approval letter:**

No file chosen

**How many stairs are in the home (including basement):**

	Number	Carpet, Wood, or Tile
From street to front door	<input type="text"/>	<input type="text"/>
From main floor to second floor	<input type="text"/>	<input type="text"/>
From main floor to basement	<input type="text"/>	<input type="text"/>
From main floor to yard	<input type="text"/>	<input type="text"/>

**Foster dogs are not allowed to run free in an unfenced area or taken to dog parks.**

**A fenced area is required. Please give the approximate dimensions of your fenced enclosure (feet x feet): \***

**Approximate height of fence at the lowest point (feet): \***

**Please describe the type of fence surrounding your enclosure:**

- Wood                       Chain link                       Welded wire                       Privacy
- Other

**Is your fenced enclosure directly connected to the house? \***

- YES                       NO

**Which of the following do you have on your property:**

- Tie-out stake                       Overhead cable                       Dog house                       Doggie door
- Separate kennel run

**Approximate size of kennel  
(feet x feet)**

**Do you have:**

- Swimming pool                       Spa                       Pond                       Other Water

**Is pool fenced separately from yard?**

- YES                       NO

**YOUR EXPERIENCE WITH PETS**

**Have you ever adopted a  
Rescue dog before? \***

- YES  NO

**If YES, from what Rescue  
organization?**

Please describe your level of experience with Golden's and/or dogs and provide an honest assessment of your abilities to recognize and deal with problem behaviors that a foster might exhibit (e.g. barking, growling, food/toy possessiveness, chewing, digging, jumping, pulling on leash, lack of house-training, etc.)

**I consider myself:**

- an experienced Golden Retriever person (current or previous Golden Retriever owner)
- an experienced dog owner
- somewhat experienced with dogs
- novice dog owner

## Previous dog experience

	Dog 1	Dog 2	Dog 3	Dog 4
Breed				
Dog's age when acquired				
Years owned				

### What type of dog training classes have you completed, if any?

### If yes, what training techniques/equipment were used or do you currently use?

### Please list any special dog-related skills you have (e.g. groomer, trainer, vet tech, etc.):

### What steps would you take to introduce a new dog into your household?

### How would you safely handle a fight between dogs?

## Your Veterinarian

Many of our rescue dogs come to us not fully vaccinated. While at your home, your foster dog may need to visit a GBR vet once or twice for booster shots. To ensure these dogs are not exposed to diseases before they are fully vaccinated, we would like to ensure your resident dog(s) (if any) are current on their vaccinations: distemper, hepatitis, parvo & parainfluenza (aka **DHPP**), **bordetella** (aka kennel cough) and **rabies** (Leptospirosis vaccination is given to all foster dogs but is not a requirement for resident dogs. Canine influenza vaccination is strongly recommended.). Please provide the name and contact information of your veterinarian as well as the name of your dog(s). If you have no resident dog(s), please disregard this section.

### May we contact your preferred veterinarian's office?

YES  NO

**Note:** Your preferred vet is the one who has seen your dog(s) and provided them with their most current vaccinations. Golden Bond Rescue will call your veterinarian's office to ensure that your dog(s) is/are current on the vaccinations mentioned above – we do not inquire about billing records or other personal information.

**Veterinarian's office name:**

**Veterinarian's phone:**

**Note:** If the records for your pet(s) are under a different name (e.g., maiden name or name from a previous marriage) from that on this application, please give that name here. Similarly, if there are two different surnames given for the applicants on this application, please indicate the one under whose name the records will be found:

**Owner's name on vet records:**

**If you have used another vet (e.g., cancer or orthopedic specialist) and wish to include their contact information, please give the office name and phone number here:**

### **CARING FOR YOUR FOSTER DOG**

**Who will be the primary caretaker of the foster dog?**

\*

**How long will the foster dog be left alone each day? \***

**Where will the foster dog be when you are home? \***

**Where will the foster dog stay while you are gone? \***

**Where will the foster dog sleep at night? \***

**How will you exercise the foster dog?**

Note: GBR foster dogs are not allowed to go to dog parks



**Are you agreeable to crate-training?**

- YES  
 NO  
 MAYBE

**If NO, why not?**

**Do you have a crate large enough for a golden?**

- YES  NO

**Do you have a flat collar ready for the dog that GBR and personal ID tags can be attached to?**

- YES  NO

**GBR uses participating vets who give us a discount (names will be provided). Are you willing to use one of these vets near you or would you be willing to ask your own vet about being a participating GBR vet and giving us a 20% discount?**

- YES  NO

## MATCHING YOU WITH A FOSTER DOG

**Which gender would you be willing to foster? \***

- Male  Female  Either

**What age of foster would you consider? \***

- 0-2  2-5  5-10  10+

**Would you consider fostering a pair that should not be separated? \***

- YES  NO  MAYBE

**What type of activity level are you comfortable with in a dog? \***

- Sedate  Active  Very Active  High Energy

**Would you be willing to foster:**

**Owner-relinquished dogs? \***  YES  
 NO

**Shelter dogs? \***

- YES  
 NO

**International dogs? (e.g., Taiwan, China, Mexico) \***

- YES  
 NO

Please indicate your experience (YES/NO) and willingness to foster (YES/NO/MAYBE) a dog with the following behavior or medical issues.

**Behavior/Medical Issues \***

	Experienced with issue	Willing to foster with issue
Bathing	<input type="text"/>	<input type="text"/>
Grooming	<input type="text"/>	<input type="text"/>
Housebreaking	<input type="text"/>	<input type="text"/>
Crate Training	<input type="text"/>	<input type="text"/>
Leash Pulling	<input type="text"/>	<input type="text"/>
Jumping	<input type="text"/>	<input type="text"/>
Stealing food off counters	<input type="text"/>	<input type="text"/>
Chewing	<input type="text"/>	<input type="text"/>
Mouthing	<input type="text"/>	<input type="text"/>
Barking	<input type="text"/>	<input type="text"/>
Digging	<input type="text"/>	<input type="text"/>
Guarding food/toys	<input type="text"/>	<input type="text"/>
Shyness/Fearfulness	<input type="text"/>	<input type="text"/>
Dog-dog aggression	<input type="text"/>	<input type="text"/>
Separation Anxiety	<input type="text"/>	<input type="text"/>
Noise Anxiety	<input type="text"/>	<input type="text"/>
Submissive Urination	<input type="text"/>	<input type="text"/>
Ear Infections	<input type="text"/>	<input type="text"/>
Allergies	<input type="text"/>	<input type="text"/>
Hot Spots	<input type="text"/>	<input type="text"/>
Hypothyroidism	<input type="text"/>	<input type="text"/>
Seizures	<input type="text"/>	<input type="text"/>
Dispensing Pills	<input type="text"/>	<input type="text"/>
Surgery Recovery	<input type="text"/>	<input type="text"/>
Hip Displasia	<input type="text"/>	<input type="text"/>
Arthritis	<input type="text"/>	<input type="text"/>
Blindness	<input type="text"/>	<input type="text"/>
Deafness	<input type="text"/>	<input type="text"/>
Hospice Care	<input type="text"/>	<input type="text"/>

**How long are you willing to foster each dog?**

**When are you able to start fostering?**

**Will you feel comfortable conducting phone interviews with potential adopters and having potential adopters come to your home to meet the foster dog?**

YES

NO

**Are you comfortable with the foster's responsibility of completing a Pre-Adoption Questionnaire on your foster dog as well as providing a website write-up and photos for the GBR website (forms and info will be provided)?**

YES

NO

**Anything else you'd like us to know or questions you may have?**

## FOSTER HOME AGREEMENT

I/We, the undersigned, in consideration for receiving temporary custody and providing temporary foster care for any golden retriever dog provided to me/us by Golden Bond Rescue, an Oregon nonprofit corporation, hereby promise and agree as follows:

1. To seek permission/guidance for all veterinary care (other than life-and-death emergency situations) with the Intake Manager before any medical treatment is administered by a veterinarian.
2. To alert the Golden Bond Rescue Adoption Director to all aspects of the dog's personality, activity level, general health, etc. This information provides the Adoption Team the information necessary to match the dog with the right adoptive home.
3. Upon reasonable notice, to make the dog available to potential adopters and to answer all questions about the dog's behavior and health, honestly, to the best of my/our knowledge.
4. In the event I/we should desire to adopt any golden retriever dog placed in our temporary foster care and custody, we further promise and agree as follows:
  - a. To immediately contact the Intake Manager and Adoption Director and inform them of this request, ideally within the first three (3) weeks of the foster dog's stay, but always before any other potential adopters are referred to, and actually see, the foster dog.
  - b. To complete an adoption contract and pay to Golden Bond Rescue an adoption fee equal to the current "donation" adoption fee usually paid by the general public. Such an executed contract and fee will be delivered/paid within three (3) business days of actual verbal adoption approval by Golden Bond Rescue.
  - c. To acknowledge that such an adoption is "AS IS," with no warranties expressed or implied, regarding the physical or mental condition of the subject dog.
5. Finally, if I/we breach/break any terms of this agreement, or are directed by Golden Bond Rescue, to return the subject to it, even if we have not breached or broken this agreement, I/we agree to immediately release/return the subject dog to Golden Bond Rescue, upon demand.

Pursuant to the terms of this agreement, I/we further agree and understand that legal ownership/title to the subject dog remains with Golden Bond Rescue and not with me/us.

Should it be necessary, I/we hereby allow any authorized agent of Golden Bond Rescue to reclaim the subject dog from me/us without further notice. Entry upon my/our premises to reclaim the subject dog for cause is expressly authorized and shall not be considered legal trespass.

Should litigation be required to enforce the physical return of the subject dog, I/we also agree to pay any legal costs and reasonable attorney fees, including those of any appeal, pursuant to ORS 20.096.

**Date \***  -  -    
Month Day Year

**Foster Home Provider (Sign your name in the box below by holding down the left "mouse" button while drawing your signature.) \***

**Foster Home Provider (Print Name) \***

**Foster Home Provider (Signature using mouse)**

**Foster Home Provider (Print Name)**

## LIABILITY WAIVER

I/we represent that I/we have experience caring for and interacting with dogs to the extent represented in the attached Foster Home or Volunteer Application. I/we further understand some dogs entering Golden Bond Rescue may have unknown or abusive backgrounds. Surrendering owners or even shelters may also lie to Golden Bond Rescue about their own dog's traits or temperament. I/we therefore understand Golden Bond Rescue can make no representations to us about the traits or temperament of a Golden Bond Rescue dog with which we interact or foster. As such, I/we hereby hold Golden Bond Rescue, as well as its volunteers, directors and officers harmless for any personal injury or property damage any Golden Bond Rescue dog may cause with which we interact or foster. This includes us, and our family members and other family companion animals. I/we also agree to fully indemnify Golden Bond Rescue for any third-party liability for any Golden Bond Rescue dog while in my/our care, control and custody.

**Date \***  -  -    
Month Day Year

**Foster Home Provider (Signature using mouse) \***

**Foster Home Provider (Print Name) \***

**Foster Home Provider (Signature using mouse)**

**Foster Home Provider (Print Name)**