

Feline Temporary Care Volunteer Application

General Information:				
Name:				
Address:				
City, State:				
Home Phone:				
Cell Phone:				
Email Address:				
Background Information:				
Are you over 21?				
Do you rent or own your residence? Circle one RENT OWN				
Do your windows have screens?				
List all members of your household (name, relationship & age):				
Does anyone in your home have any allergies to pets? YES NO				
If yes, how will they cope:				
Do all members of the family want to have a temp cat in the house? YES NO				
Do you have a plan for separating the temp cat from your pets at first? YES NO				
How many hours a day would to	he temp cat be left alone?			
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Pet Information:				
List your current pets, including breed:				
List any previous pets, including breed, from the past 10 years:				
Are your pets spayed or neutero	ed?	YES	NO	
Are your pets' vaccinations current?		YES	NO	
Are your pets in reasonably good health?		YES	NO	
Do you allow your cats to go outside? YES		YES	NO	
Are your cats declawed? 2 or 4 paws?				

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List names & phone numbers for vet clinics that you've used for routine per years:	t care in the	past 10
Veterinary history will be verified as part of the approval process.		
What are your pets' arrangements when you are not at home during the d	ay? 	
Temp Care Expectations:		
I can take care of these types of cats:	YES	NO
Pregnant or nursing mothers?		
Kittens up to 3 months old? You must foster at least 2 at a time.		
Older kittens up to 1 year old? You must foster at least 2 at a time.		
Adults?		
Sick or injured kittens or cats?		
I am willing to work with the following:	YES	NO
Kittens that need to be bottle fed (requires round-the-clock care)	ILS	NO
Pregnant cat giving birth & raising litter (possible 3-5 month commitment)		
Teaching kittens/cats to use the litterbox		
Hand-feeding kittens		
Socializing shy or frightened kittens/cats		
Giving oral medications		
WSHS animal care staff will support and give instructions as needed.		
Why do you want to foster a cat or kitten?		
Please describe any experience you have taking care of cats:		
How long can you commit to a cat or kitten? WEEKS	MONTHS	

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Waiver

In consideration of my participation in the activities of the West Suburban Humane Society, I do hereby agree to hold free from any and all liability the West Suburban Humane Society and its respective officers, employees and members and do hereby for myself, my family, members of my household, my heirs, executors, and administrators, waive, release and forever discharge any and all rights and claims for damages which may hereafter accrue to me or my property arising out of or connected with my participation in any of the activities or duties of the West Suburban Humane Society.

I hereby do declare myself to be physically sound, having medical approval to participate in the activities of the West Suburban Humane Society.

I understand that the cats/kittens in my temporary care are the property of the West Suburban Humane Society. Any activity concerning these cats/kittens must be cleared through the Executive Director, Animal Care Manager or the Feline Temporary Care Manager. The only exception is a critical situation that requires emergency care, which should be pursued with a veterinarian approved by West Suburban Humane Society. West Suburban Humane Society must be informed within 24 hours if emergency care was required. West Suburban Humane Society animal names must be used for any vet care for billing clarification.

I acknowledge that I have read, understand and will adhere to all the terms, conditions, policies and procedures of the West Suburban Humane Society Temporary Care Program. I do understand that at any time I cannot fulfill these terms, conditions, policies and procedures of the West Suburban Temporary Care Program I will by mutual agreement end my tenure as a Temporary Care Home Volunteer.

Signature:	Date: