



Fairy Tails Corgi Rescue of St. Louis Inc.

Box 190816, St. Louis, MO 63119

www.corgirescuestlouis.org

Telephone: (314) 631-2577

VOLUNTEER / FOSTER APPLICATION

We will contact you (email preferred) to confirm that we have received your application.

DATE _____

GENERAL INFORMATION

NAME (S) _____ | AGE (S) _____

ADDRESS _____

CITY, STATE, ZIP _____

HOME PHONE _____ | WORK PHONE (S) _____
**If no phone number is given, this application will be discarded.*

GOOD TIME OF DAY OR EVENING TO CALL _____

E-MAIL (S) _____

DRIVERS LICENSE NUMBER (S) _____ | STATE _____

What is your occupation or student status? _____

Is your work or school seasonal? _____

I live in a:
 House
 Duplex
 Apartment
 Condo
 Mobile Home
 Other: explain
Do you:
 Own
 Rent
 Other arrangements, explain
If Applicable:
Are dogs allowed where you live?
Name and phone number of apartment, management, or landlord:

**By filling out the information above, you grant us permission to contact your landlord.*

How long have you been at this address? _____

Are there any restrictions on pets where you live (breed, number owned, size, etc) if you are interested in fostering? _____

Do you have a fenced yard or area for the dog? Describe your fence (height, material such as chain link, wood, etc) and yard (size, grass, gardens, pool, ponds, wooded, etc). If you do not have a yard, what arrangements will you have for the dog's exercise and toilet duties? – Applies to foster homes only.

Is someone home during the day? (fostering) _____ | At night? (fostering) _____

How many hours a day would the dog typically be left alone? (fostering)

Are you: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Have a partner <input type="checkbox"/> Have a roommate <input type="checkbox"/> Divorced	Does everyone approve of volunteering/fostering?
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HOUSEHOLD MEMBERS

Please tell us about the members in your household – including those that are part time members (i.e. grandchildren, stepchildren, neighbors who visit regularly, etc).

Name	Age	Relation to you	Full or Part time member	Used to Dogs?

Does any member of the household have allergies? Please explain:

CURRENT PET INFORMATION

Please list all current pets. Please include roommate’s pets, pets that regularly visit such as family pets that stay with you, etc.

Name	Type or Breed	Sex	Age	Spayed/ Neutered	How long owned or Relationship to you

PET HISTORY

In the table above, Please list pets you have owned in the past three years (not under current pets).

Name	Type or Breed	Sex	Age	Spayed/ Neutered	How long owned & reason no longer with you

VETERINARIAN:

Please list your current vet, or the vet who saw your former pets if applicable. If you do not currently have a vet, please list the vet you plan on using.

Veterinarian's Name	Clinic's Name	Address (city & state)	Phone Number

When was your last vet visit and what was it for?

May we contact your vet?

VOLUNTEER INFORMATION

Please answer the following questions

Have you read any books on dog care or training? Please list:

Have you ever volunteered for an animal related group before? Please list organization (s):

In what way are you interested in helping – adoption/special events, fostering, fund-raising, transporting dogs, etc.?

Are you agreeable to having a representative visit you in your home before volunteering?

As a fully volunteer organization, it is vital that we are able to work well together. When possible group decisions are made, and at other times decisions will be made by the director. Do you agree to abide by and follow such decisions?

FOSTER INFORMATION

Please answer the following questions if you are interested in fostering a dog.

I am interested in fostering (please circle):

Welsh Corgis

Welsh Corgi Mix Dogs

Doesn't matter – whatever dog needs me most.

Are you considering fostering on a long -term or short-term basis? (Some dogs are placed in just a few days, for others it's taken over six months. Typically we have the dogs 1-3 months.). Can you foster until your dog is placed? Please be specific.

Have you ever housetrained a dog before?

Have you ever obedience trained a dog before?
If you used a trainer or facility, who did you use?

Where will the dog stay during the day?

Are you willing to maintain training and/or behavior management techniques, as necessary, to benefit an individual foster dog, even if it is different than how you would choose to handle your own dog (crate training for example)?

At night?

How would you discipline your foster dog and for what undesired behavior(s)?

Are you willing to return the foster dog to Faery Tails Corgi Rescue of St. Louis Inc. (FTCR) if at ANYTIME it is deemed necessary and in the dog's best interest to do so?

Do you agree not to place a FTCR foster dog independently?

If a foster dog is not immediately available, are you willing to wait?

PLEASE FILL OUT THE REFERENCES ON THE NEXT PAGE. PLEASE ADVISE YOUR REFERENCES THAT YOU LISTED THEM SO THEY CAN EXPECT A CALL. WE ALSO REQUIRE A VETERINARY REFERENCE – IT IS IMPORTANT THAT YOU NOTIFY YOUR VET CLINIC AND GIVE YOUR CONSENT FOR THEM TO RELEASE INFORMATION TO OUR ORGANIZATION.

How did you find out about our group? Please be as specific as possible.

- | | | |
|---|--|---|
| <input type="checkbox"/> News | <input type="checkbox"/> Other online source,
please list below. | <input type="checkbox"/> Referral from dog related
professionals (Veterinarian, trainer,
kennel, etc) Please list name of
person or organization below |
| <input type="checkbox"/> From a friend/relative | <input type="checkbox"/> Newspaper, which one? | <input type="checkbox"/> Other source not mentioned here: |
| <input type="checkbox"/> Signs | <input type="checkbox"/> Humane society, pound,
animal control, other
rescue group, etc.
Please list below. | |
| <input type="checkbox"/> Petfinder | | |
| <input type="checkbox"/> Our main website | | |
| <input type="checkbox"/> Another Corgi or
German Shepherd
related group/club:
Which one? | | |

I (WE) HAVE ANSWERED TRUTHFULLY AND UNDERSTAND IF ANY INTENTIONAL FALSE STATEMENTS HAVE BEEN GIVEN THIS APPLICATION WILL BE VOIDED.

Signature of Applicant

Date

Signature of Co-Applicant

Date

** Note: If you are under the age of 18 years of age, a parent or guardian must also sign this application.*

Please return this **signed** application to:
FAERY TAILS CORGI RESCUE OF ST. LOUIS INC.
Box 190816
Saint Louis, MO 63119

Please enclose a \$5.00 donation. This donation will directly benefit the rescue dogs. It takes into consideration the time, effort, and expense involved to carefully place our dogs into adoptive homes.

THANK YOU FOR YOUR INTEREST IN OUR NON-PROFIT VOLUNTEER ORGANIZATION. ONE OF OUR REPRESENTATIVES WILL BE IN TOUCH WITH YOU AS SOON AS POSSIBLE.

WE RESERVE THE RIGHT TO REFUSE AN APPLICANT

REFERENCES

Please list three references – include one neighbor, and at least one reference that is not related to you.

Name(s)		Relationship:
Email Address		
Phone Number(s)		

Name(s)		Relationship:
Email Address		
Phone Number(s)		

Name(s)		Relationship:
Email Address		
Phone Number(s)		