



FieldHaven Feline Rescue
 2754 Ironwood Lane • Lincoln, CA 95648
 (916) 434-6022
 www.fieldhaven.com

APPLICATION FOR FELINE FOSTERING

Date:			
Name:			
Address:			City/State/Zip
Telephone numbers:	(home):	(work):	(cell):
Type of residence:	<input type="checkbox"/> House	<input type="checkbox"/> Apartment/Condo	<input type="checkbox"/> Mobile Home <input type="checkbox"/> Farm/Barn
If rental, are cats allowed?:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Complex name/address:			
Manager/Landlord:			Phone number:
Applicant Age:	<input type="checkbox"/> Over 21	<input type="checkbox"/> Under 21	
Number of People in Household:	Family's age group: <input type="checkbox"/> 18 & under <input type="checkbox"/> 18-60 <input type="checkbox"/> Over 60		
If children are in the household, please list ages:			
What other pets are in your household?			
Type of Pet	Years Owned	Spayed/Neutered	Inside/Outside
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Inside <input type="checkbox"/> Outside
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Inside <input type="checkbox"/> Outside
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Inside <input type="checkbox"/> Outside
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Inside <input type="checkbox"/> Outside
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Inside <input type="checkbox"/> Outside
Name of Veterinarian:			Phone:
Email Address:			