

The Animal Trust Fund
Registered charity no. 6323
Co. Waterford



Date:
Reference:
Phone: +353 863039634

APPLICATION TO ADOPT OR FOSTER

Animal's name: _____

Species: _____

(dog or cat)

PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS

Name of applicant: _____

Address of applicant: _____

Home phone: _____

Mobile: _____

Email: _____

Applicant's occupation: _____

Have you previously applied to the ATF for an animal? _____ (If yes when and where)

CATS

Have you ever owned or fostered a cat before? _____ If yes what happened to it?

DOGS

Have you ever owned or fostered a dog before? _____ If yes, what happened to it?

Have you any other pets? _____ If yes please give details _____

Why do you want a cat? _____

Why do you want a dog? _____

What type of accommodation do you live in? _____

(State if rented) _____

Will you be moving shortly? _____ If yes please give details _____

Does your accommodation open directly onto a busy road? _____

How many people live in your house? _____

Adults _____ Children _____ Children's ages _____

Is there anyone in the house allergic to animals or an asthma sufferer? _____

Where will the pet be during the day? _____

Where will the pet be at night? _____

Where will the pet's bed be situated? _____

Where will the pet stay when you go away? _____

On average how long will the pet be left on its own and why? _____

Please give the name and address of your vet _____

What is your opinion on neutering? _____

How do you feel about a member of staff visiting your home? _____

I confirm that I am over 18 years of age. If for any reason after I adopt or foster an animal and find I am unable to keep it, I will return it to the Animal Trust Fund.

Signature _____ **Date** _____

Inspector _____ copyright @animal trust fund