## Area Coordinator

ages

Please complete and return this form to the coordinator for the County you live in – details are on our contact page: <a href="https://www.labrador-rescue.org.uk/contact.html">www.labrador-rescue.org.uk/contact.html</a> Please note this form needs to be printed out, completed and then scanned back into your computer to email back to us.





Patrons: Maria Slough-Media Photographer Marc Abraham BVM&S MRCVS
Charity No: 1105955 Jimmy Hill OBE & Bryony Hill www.labrador-rescue.org.uk

# FOSTER APPLICATION FORM

Thank you for your interest in fostering a rescued Labrador. The information you provide on this form will help us to match you and a Labrador, please take time to read and complete, then return it to the Area Co-ordinator above, you will then be contacted by one of our Voluntary Homecheckers to arrange a home visit.

Email	• • • • • • • • • • • • • • • • • • • •		•••
Proof of identit	y and age of the app	plicant will be required at the home vis	sit
What type of p	roperty do you live	inIs your prop If rented w	perty owned or rented re will require proof of landlords permission to have a dog
Does your prop	erty have a garden.	Is the garden for	your sole use and only accessed by you
Is the Garden f	ully secure	Height of fencing	Type of fencing
Is the dog to liv	ve in the house or k	tennel outside	
		If outside kennel please provide detail	ils
Please put your wo meetings etc. It is	vital we know when you	ou work from home please specify how frequent are at home .If you are self-employed please sp	tly and for how long you are away from home for business pecify business type. i.e. accountant, gardener etc.  ill not proceed with your application.
*Adults	*Age	*Occupation	*Hours Worked(i.e.9am-5pm)
*Children and th	eir ages		
*Do children vis	it regularly		
and if so what a	•		

Have you ever ow	ned a dog before	If so wl	hat breed
Do you have a d	dog now and if so		How old was the dog when you got it
<u>Breed</u>	<u>Age</u>	<u>Sex</u>	<u>Castrated/Spayed</u>
Do you have an	y other pets		If so what
therefore you hav condition and how	e any short or long term the dogs needs would be	health issues which met.	arge, strong, lively dog and give it sufficient exercise in may affect your ability to do this please give details of you
Please consider	the following question		
			ur and or training issues. Would youYES/NO
	_		YES/NO
•	-		YES/NO
•	•		YES/NO
_			
_	_	_	YES/NO
		-	YES/NO
Take a dog with a	health condition requiring	regular medication	YES/NO
_		_	YES/NO
			YES/NO
			YES/NO
Are you considering	ng adopting a dog		YES/NO
=	= =	=	
Please be as flex	ible as possible as a fos	ter place can literal	ly save a dog's life.
DOG/BITCH/EI	ГНЕК		Yellow/Chocolate/Black
Ideal age range:	Minimum age		Maximum age

Please note that for applicants aged 70 to 74 years we will usually foster a dog of 5 years plus for applicants aged 75 to 79 years we will usually foster a dog of 7 years plus for applicants aged 80 years and over we will usually foster a dog of 10 years plus

Please state your reasons for wanting to foster a dog and a Labrador or Labrador cross in particular, along with any other information you feel relevant.	
	•••••
	•••••
Are you happy to provide details of a veterinarian or other professional person as a reference should this be required by LRRSE.  YES	5/NO
Have you applied to any other rescue and if so which one(s).	
Have you ever been refused by any animal rescue YES/NO If so which one(s)	
How did you hear about us	
Do you agree to a representative of LRRSE visiting you to ascertain the welfare of the dog	О
Your veterinary surgery details	
Name of SurgeryTelephone No:	
Address	•••
Please find attached a foster agreement for your perusal. If you have any questions please do not hesitate to phone your RRSE Area Coordinator on the above number.	our
SIGNEDDATE	•••••

#### Area Co-ordinator

This is a DRAFT COPY and has been sent to you solely for your perusal.





Charity No: 1105955 Patrons: Marc Abraham BVM&S MRCVS Jimmy Hill OBE & Bryony Hill www.labrador-rescue org.uk

## FOSTERING AGREEMENT

FOSTERERS:		
Name		 
Address		 
Postcode:	Tel.No	 
Mobile No	e.mail	 
Dogs Details		

I/We declare that in consideration of receiving the dog described above from Labrador Retriever Rescue Southern England (L.R.R.S.E) to be fostered by me/us, I/We bereby under ake that whilst it is in my/our care I/we will:

- 1. Care for, feed and exercise the dog regularly at keep the Area Coordinator up to date with the dogs behavior and well being.
- 2. Ask permission from the Area Coordinator to take the dog to the vet for any treatment. The cost of the treatment will be met by L.R.R.S.E Ox Var permission has been confirmed by the Area Coordinator prior to the visit. If the dog needs urgent pergency treatment this will paid for by L.R.R.S.E but the Area Coordinator must be inform a simmediately.
- 3. I understand that it is our Ar a Core of 's role to find a suitable new home for the dog and I will not advertise or displace formation bout the dog on any web sites or forums.
- 4. If I have a nearbory relative vito is interested in the dog they may apply to your Area Coordinator and their application will be addeded but his/her decision is final.
- 5.2 of part with re dog any reason whatsoever except to return it to L.R.R.S.E upon request or if I/we are upon ble to keep.
- 6. Not leave the d g on its own for long periods of time.
- 7. Never leave the dog unsupervised around babies and children and never allow children under age 16 to be in sole charge of the dog without adult supervision.
- 8. Ensure the dog wears an identification disc showing my/our telephone number. If you do not have a disc please ask your Area Coordinator who will arrange for one to be sent to you.
- 9. Allow a member of L.R.R.S.E to visit the dog.

- 10. Allow L.R.R.S.E. to repossess the dog if in their opinion the terms of this agreement are not being adhered to or the dog is not being properly cared for, or a permanent home has been found for it.
- 11. Not use the dog for breeding.
- 12. Inform L.R.R.S.E. should the dog die.

I/We understand that:

- L.R.R.S.E. will reimburse me for the dogs food upon receipt of purchase submittee. To Area Coordinator attached to a completed expenses form. Permission must be given by the Area Coordinator prior to purchase of any item other than the main dog food.
- L.R.R.S.E. will accept no liability as to the description, condition, health or toperament of the
  dog and gives no warranty of any kind expressed or implied.
- Information concerning the habits and past history of the dog is passed on by .R.R.S.E. to me/us in good faith and that it has been based on statements prace by the previous owners(s) and there is no guarantee of reliability.
- L.R.R.S.E. will not accept liability for any consequent whatever resulting from events attributable to failure to give information or the transmation of wrong information.

The dog is believed to be in good health excert there specific conditions have been made known to me/us.

L.R.R.S.E. will arrange appropriate assurance cover against the cost of veterinary treatments as well as Third Party cover.

Particular attention is drawn to the legal requirements relating to animals causing damage or injury to third parties or their property and control death/injury by livestock and also the possibility of an animal causing nuisance.

17 We declare the 17 W	in over to years or age.	
Signed		date

### Pleas Note:

If your ester dog is microchipped and we do not already have a record of the number we may ask you to get your ve to scan him/her and to give you the number.

Sometimes pre fous owners do not remember to tell us their dog is microchipped, even though we ask them the question. Should your vet scan your foster dog and find a microchip please check with your area coordinator that we have the microchip number on our records.

Please ensure you pass any microchip number to us immediately.

DO NOT contact the microchip company yourself. WE will contact the chip company and update the information once the dog is rehomed.