## ZEBS WISH EQUINE SANCTURAY FOSTER HOME APPLICATION



1. Please provide us with the requested information below:

- First Name: \_\_\_\_\_
- Last Name: \_\_\_\_\_\_
- Email: \_\_\_\_\_
- Street 1: \_\_\_\_\_
- Street 2: \_\_\_\_\_
- City: \_\_\_\_\_
- State / Province: \_\_\_\_\_\_
- ZIP / Postal Code: \_\_\_\_\_\_
- Phone Number: \_\_\_\_\_\_
- Date of Birth: \_\_\_\_\_
- 2. Work Phone Number: \_\_\_\_\_
- 3. Mobile Phone Number: \_\_\_\_\_
- 4. Emergency Contact phone: \_\_\_\_\_
- 5. Current Employer: \_\_\_\_\_
- 6. Number of Years with Employer: \_\_\_\_\_
- 7. What type(s) of equines are you interested in fostering? (Please Check)
  - o Mares
  - Fillies
  - Recently Castrated colts/stallions

Zebs Wish Equine Sanctuary 34950 Se Colorado Rd, Sandy, OR 97055 ph) 503-341-1102 Humans Healing Horses Healing Humans

- Geldings
- Miniature Horses
- Mules/Donkeys

8. Do you have children? If yes, please list their ages and please explain how they will help with care of your foster animals.

9. Are you currently a volunteer with Zebs Wish Equine Sanctuary? If yes, how long?

10. Do you live at the house site where the equines will be fostered? If no, please explain.

11. Size of property (in acres). Do you have a safe barn or other shelter on site?

12. Do you own the home in which you plan to foster or are you renting?

13. If you are renting the home, will your landlord allow you to house equines on the property?

14. Have you or a member of your family ever been charged with or convicted of animal abuse or neglect? If yes, please explain.

15. Have animals that have ever been in your possession been seized by law enforcement? If yes, please explain.

16. Are you a member of any Horse Club and or Organization? If yes please explain.

17. Are you able to provide transport for your equine foster?

18. What type of trailer do you currently use?

19. Are you willing to foster equines that Zebs Wish has no background information on?

- 20. Are you willing to foster an equine with training issues?
- 21. Please explain your training experience:
- 22. Would you be willing to foster an equine with health issues?
- 23. Would you be willing to foster an older/senior equine donkey or mule?
- 24. Would you be willing to foster an equine that is less than one year of age?

25. Would you be willing to foster a mare in foal?

26. Do you currently own any horses or farm animals? If so, please list all breeds, sex, and number of each

27. Please provide the following information: What was the date your equine(s)were last vaccinated? What vaccinations did your equine(s) receive? What is your deworming protocol? What do you feed your current equines? How frequently? How often are their feet trimmed?

28. In the past 5 years, have you had any equines/farm animals die in your care? If yes, please explain.

29. Please describe your experience with equines/farm animals

30. How often do you plan on having a farrier trim your foster?

31. If you have other farm animals, do you have adequate facilities to quarantine your foster and feed them separately? Please explain.

32. Will your foster be kept in a barn, pasture or both?

33. What type of fencing do you have?

34. Is there debris in the pasture such as tree limbs, metal, glass, trash, other. Please describe.

35. Do you have liability insurance?

36. Who is your veterinarian? (Please list name, address, phone number and the approximate distance from your facilities.)

37. Who is your farrier? Please list contact information

38. Zebs Wish Equine Sanctuary recommends that some foster animals be isolated from resident animals for a period no less than 14 days. This will help minimize possible exposure of transmissible diseases to resident animals. Explain the manner in which you will keep your foster(s) isolated from resident pets for 14 days if applicable.

39. Zebs Wish asks their foster homes to pay for feed (hay and grain) for their foster animals. Do you agree to provide and pay for adequate food for your foster?\_\_\_\_\_

If other arrangements were made prior for payment of feed please provide details here.\_\_\_\_\_

40. Zebs Wish agrees to reimburse foster homes for vet and hoof care expenses if needed by foster home. Does foster home require reimbursement for feet and vet care?\_\_\_\_\_

## \*All expenses incurred by foster home are full tax deductible within the extent of the law.

Upon approval into the Zebs Wish Foster Program, I agree to abide by all policies pertaining to the program and uphold my responsibilities to Zebs Wish and the foster animals in my care at all times. I certify that the information is true and accurate to the best of my knowledge. I understand that providing false information can lead to removal from the Zebs Wish Foster Program. I agree to allow any member of the Board of Directors access to the facility where my foster animal(s) are kept at any time to evaluate their care. If care is found to be lacking, the animals will be immediately removed from the location. You will be permanently dropped from the equine foster program and prevented from future association with, and adoption privileges from Zebs Wish Equine Sanctuary. Please sign that you have read and understand the above statement:

\_\_\_\_\_ Date: \_\_\_\_\_

Liability Statement -

All Foster homes are responsible for all liability when the fostered animal is in their care. Do you understand this statement? Please Initial: \_\_\_\_\_

I, my successors and/ or assigns, and legal representation if needed, agree to take responsibility for all damages during the care of this animal, fully releasing the Zebs Wish Equine Sanctuary of all liability while it is, they are in my care. I understand fully what my responsibility is legally. At any time that I desire to end this foster agreement, I will return this animal to Zebs Wish, or will ask that a time be scheduled to return the fostered animal to the shelter. The animal will be in the same or better condition for return to the shelter. Signed in agreement and understanding of all statements made within this application:

\_\_\_\_\_ Date: \_\_\_\_\_