



# MINNESOTA BOSTON TERRIER CLUB FOSTER ADOPTION APPLICATION

(A \$5 fee is required with all applications for insurance purposes)

If **any** information is omitted or the application fee is not included, this application will be discarded. We inspect home environment with each application. We reserve the right to refuse any applicant.

Date \_\_\_\_\_

## Contact Information (please print)

Your Name \_\_\_\_\_ Spouse's name (if appropriate) \_\_\_\_\_

Address \_\_\_\_\_  
Street Apt # City State Zip

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

You will be contacted evenings or weekends.

Email \_\_\_\_\_

## Additional Information

How many people reside in your household? # of Adults \_\_\_\_\_ # and ages of children \_\_\_\_\_

Who else will have REGULAR contact with the dog (weekly, monthly) \_\_\_\_\_

Do you own or rent  Own  Rent How long in this location? \_\_\_\_\_  
If less than one year, please provide previous address and information.

If you rent or own a town home/condominium, please provide contact information for your landlord/management co.

Name: \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_  
Street Apt # City State Zip

Fenced yard?  Yes kind of fence (invisible, chain link, wood) \_\_\_\_\_

Height of fence \_\_\_\_\_ #of gates \_\_\_\_\_

No How do you plan to exercise the dog and where? \_\_\_\_\_

Do you operate a home based business?  Yes  No

If yes, what is the nature of your business and how often would vendors/clients visit your home?

Are there Dogs currently in the home?  No  Yes (list below)  
Name Breed Age Sex Sterilized Y/N

Are there other animals in the home (cats, guinea pigs, birds, etc.)?  No  Yes (list below)

Please list the dogs you have owned in the last five years.

Name Breed Age Sex Sterilized Y/N

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Continue on back of form if necessary.

Please explain why previously owned animals are no longer in your home. (use back of form if necessary)

What kind of training have your dogs had?

Where will the Boston stay when you are away from the home (i.e., crate, kitchen, running free, etc.)

How many hours will the dog stay alone? \_\_\_\_\_ Hours per day \_\_\_\_\_ days per week

Why are you interested in fostering a Boston Terrier? (use back of form if necessary)

What qualities/traits do you think you will find in Boston Terriers?

Have you ever owned a Boston Terrier?  No  Yes – when? \_\_\_\_\_

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Have you ever bred Boston Terriers?  No  Yes (complete below)

When, where and for how long? \_\_\_\_\_

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Have you ever trained or shown a Boston Terrier or other dog?  No  Yes – please elaborate

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Are you aware of the special needs of the Boston Terrier?  No  Yes – please explain

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Foster homes are expected to provide daily care and treatment. MBTC has financial responsibility for all medical needs and expect the foster home to comply with any medical directives including giving shots, administering medication. We will provide any items that were surrendered with the animal such as leashes, collars, crates. You will be expected to provide for the daily comfort of the animal which may include a bed, place to sleep, and general nutrition. We do not reimburse for the cost of food.

What financial commitment would you consider appropriate during foster care? \$ \_\_\_\_\_/month

Many of the dogs surrendered to us require behavioral modification or training. This can include housebreaking or just learning to walk on a leash. While we do not provide formal training, we will guide and assist you in this process.

How much time would you be willing to commit for behavior modification?

I am interested in  Puppy  Male  Female  No Preference  
 Young adult between the age of \_\_\_\_\_ and \_\_\_\_\_  
 Older adult between the age of \_\_\_\_\_ and \_\_\_\_\_

Would you accept a Boston with health issues?  Yes  No

Would you accept a deaf Boston?  Yes  No

Would you accept a Boston with behavior issues?  Yes  No

Would you accept two dogs from the same home?  Yes  No

The foster parent/family must be available to assist in the placement of their foster dog. This includes being available for our quarterly Meet & Greet opportunities with the public. The date of this event is announced in advance and notice will be sent by email. It is your responsibility to attend this event and be prepared to discuss the dog with any prospective adoption families. This event generally precedes our regular monthly meeting and will begin at 12 Noon. Our standard venue is Pet Junction located at 694 and Rice Street, just west of 35E.

Additionally, foster families are asked to accompany a placement representative at the time the dog is placed. All dogs are placed with a 3 week foster to adopt to ensure that this will be a good and permanent placement for the dog. You will be asked to meet at the prospective home with the dog and all items that were surrendered with the animal. This will be coordinated in advance and you will be asked to be listed as a contact for this family during the 3 week period as well as provide a written description of the animal's daily activities / needs / quirks, etc.

How did you hear about the Minnesota Boston Terrier Club and Rescue?

- Humane Society    Dog Show    Internet    Friend    Veterinarian  
 Family Member    AKC    Dog Trainer (please name) \_\_\_\_\_  
 Other (please explain) \_\_\_\_\_

**References**                      Personal references (no relatives please)

1. Full name \_\_\_\_\_ Phone Number \_\_\_\_\_  
2. Full name \_\_\_\_\_ Phone Number \_\_\_\_\_  
3. Full name \_\_\_\_\_ Phone Number \_\_\_\_\_

Veterinary References for current or past pets.

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Full address \_\_\_\_\_

I have read, understand and agree with the policies and procedures set forth in this application. I understand that my application will not be reviewed if any questions are left unanswered or the processing fee is not included. I am able to make the financial and time commitment and understand that standard expenses are at my cost. I will make myself available to assist in the process of placement of the animal in my care.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Please include your personal check or money order for \$5 made out to Minnesota Boston Terrier Club and return this with the application form to:**

Annie Bartholomew  
MBTC Foster Home Coordinator  
5217 33<sup>rd</sup> Avenue South – Minneapolis MN 55417

Thank you for your interest in the Minnesota Boston Terrier Club. We appreciate your willingness to take the time to fill out this foster application. All information is CONFIDENTIAL.

If you have any questions, please call the Club line at 651-254-9874 or visit our website at [www.mnbtc.com](http://www.mnbtc.com) to send an email.

You will be contacted to confirm receipt of the application and further review the foster process. Please be patient as we are a volunteer organization.