

## 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.

			Spauca's p	ama (if appropriate)		
our Name			spouse s n	ame (if appropriate)		
Address						
	Street		Apt #	City	State	Zip
	acted evenings		Work	Cell		
mail				<u></u>		
dditional Info	rmation					
low many peor	ole reside in you	r household? # of	Adults	# and ages of children		
- , , , ,						
	ovo PEGIJI AP co	ntact with the dea (w	rookly monthly)			
	ave REGULAR co	ntact with the dog (w	veekly, monthly)	_		
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Are there dogs currently in Name	the home?	No  Ye	s (list below) Age	Sex	Sterilized Y/N
Are there other animals in t	the home (cats, guine	ea pigs, birds, etc.)?	☐ No	☐ Ye	s (list below)
Please list the dogs you hav		ive years.			
Name	Breed		Age	Sex	Sterilized Y/N
Continue on back of form if	necessary.				
Please explain why previou	sly owned animals ar	e no longer in your	home. (use back c	of form if nece	essary)
What kind of training have	your dogs had?				
Where will the Boston stay	when you are away f	rom the home (i.e.,	crate, kitchen, rur	nning free, etc	:. <b>)</b>
How many hours will the do	og stay alone?	Но	ours per day	da	ays per week
Why are you interested in f	ostering a Boston Te	rrier? (use back of	form if necessary)		

Have you ever owned	a Boston Terrier?	No	Yes – when?	
Have you ever bred Bo When, where	oston Terriers?  and for how long?	□ No	Yes (complete below)	
Have you ever trained	or shown a Boston Terrier or other d	og?	Yes – please elaborate	
Are you aware of the s	special needs of the Boston Terrier?	□ No	Yes – please explain	
and expect the foster will provide any items provide for the daily of exception of a prescri	ected to provide daily care and treatm home to comply with any medical dire that were surrendered with the anim omfort of the animal which may inclu ption diet, we do not reimburse for t	ectives including giveral such as leashes, on the decident of the cost of food.	ing shots, administering medicat collars, crates. You will be expect eep, and general nutrition. <b>With</b>	ion. We ted to
Many of the dogs surr learning to walk on a l	tment would you consider appropriat endered to us require behavioral mod eash. We do not provide formal train ess. How much time would you be wil	dification or training	. This can include housebreaking vide professional training resour	ces to
I am interested in		ge of	e	<del></del>
Would you accept a Bo	oston with health issues?	Yes	No	
Would you accept a de	eaf Boston?	Yes	No	
Would you accept a Bo	oston with behavior issues?	☐ Yes ☐	No	
Would you accept two	o 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 any 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.

Additionally, foster families are asked to accompany a placement representative at the time the dog is placed. All dogs are placed with a 4 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 4 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	errier Club and Rescue?
	Dog Trainer (please name)
Other (please explain)	
<b>References</b> 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 pol application will not be reviewed if any question	cies and procedures set forth in this application. I understand that my are left unanswered or the processing fee is not included. I am able to inderstand that standard expenses are at my cost. I will make myself
Signed	Date
Please include your personal check or money of with the application form to:	rder for \$5 made out to Minnesota Boston Terrier Club and return this  MBTC Foster
	P.O. Box 10733
	St. Paul, MN 55110

To request a hard copy of this application form by mail, please contact us at <a href="mailto:mnbostonterrierclub@gmail.com">mnbostonterrierclub@gmail.com</a> or call the phone number below. We will be happy to forward it on to you.

Thank you for your interest in the Minnesota Boston Terrier Club. We appreciate your willingness to take the time to fill out t his foster application. All information is CONFIDENTIAL. If you have any questions, please call the Club line at (612) 235-0614.

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.