



**W.O.O.F.**  
Westies Of Ohio Fundraisers  
Foster Home Application

\_\_\_\_\_ date

Thank you for volunteering to share your home with a rescued Westie. The information you provide on this application will help us make the best match possible between a rescued Westie and a prospective foster home. Please complete the application and return it to W.O.O.F. at the address provided at the end of this application. Thank you for caring!

PRIOR TO PLACING ANY W.O.O.F. RESCUE IN A FOSTER HOME,  
AN ON-SITE VISIT MAY BE REQUIRED.

**Prospective Foster:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street Name/Number (Include Apartment Number) City State Zip Code  
 Single Family Home  Duplex  Apartment  Condo  Farm  Live with family (parents/other relative)  
Phone: (\_\_\_\_) \_\_\_\_\_ Home E-mail: \_\_\_\_\_  
(\_\_\_\_) \_\_\_\_\_ Work Cell Phone: (\_\_\_\_) \_\_\_\_\_  
Occupation: \_\_\_\_\_

**Reason for wanting to Foster:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Preferences:**

**Gender:**  No Preference  Prefer Female  Prefer Male

**I will foster a dog, age:** (check all that apply)

No Preference  age 1-4  age 5-9  9 years or older

**Are you willing to housetrain or retrain if necessary?**      Yes      No

Number of adults in household \_\_\_\_ (18+/yrs)    Number of children in household \_\_\_\_    Ages: \_\_\_\_\_

Are other household members willing to help foster the rescue?    Yes     Not Sure

Do you have a completely fenced in yard/area for the dog?    yes    no    in process

What kind of a fence do you have? \_\_\_\_\_

Do you have a swimming pool or hot tub?    yes    no

Is it separated from the dog area by a fence?    yes    no

Who will be the dog's primary caretaker? \_\_\_\_\_

Does he/she have experience with dogs?    yes    no    Explain: \_\_\_\_\_

\_\_\_\_\_

Is anyone home in this person's absence?    yes    no    Who? \_\_\_\_\_

Does this person have experience with dogs?    yes    no    Explain: \_\_\_\_\_

\_\_\_\_\_

Is this person capable of exercising the dog?    yes    no    Explain: \_\_\_\_\_

\_\_\_\_\_

How long will the dog be with out humans on a daily basis? \_\_\_\_\_

How long will the dog be alone during the evening? \_\_\_\_\_

Where will the dog be kept while alone? \_\_\_\_\_

Crate    Loose in the house    Confined to a room    In a penned area    Yard    Other

Explain: \_\_\_\_\_

Where will the dog sleep? \_\_\_\_\_

Is anyone in your household allergic to dogs?    yes    no    If yes, who? \_\_\_\_\_

Does anyone in your household have Asthma?    yes    no    If yes, who? \_\_\_\_\_

Does your job require frequent out of town travel?    yes    no

Who will care for the dog when you are out of town? \_\_\_\_\_

Do you currently own a Westie? If yes, what is his/her name(s) and age \_\_\_\_\_

\_\_\_\_\_

Have you ever owned a terrier?    yes    no    What kind? \_\_\_\_\_

**Pet Experience:**

Please list all the pets you have owned in the past ten years. If none, include pets you have owned during your adult life and any pets that have resided in your residence that you do not own.

| Species | Breed | Gender  | Age   | Altered?   | Where is it now? |
|---------|-------|---------|-------|------------|------------------|
| _____   | _____ | __M __F | _____ | __Yes __No | _____            |
| _____   | _____ | __M __F | _____ | __Yes __No | _____            |
| _____   | _____ | __M __F | _____ | __Yes __No | _____            |
| _____   | _____ | __M __F | _____ | __Yes __No | _____            |
| _____   | _____ | __M __F | _____ | __Yes __No | _____            |
| _____   | _____ | __M __F | _____ | __Yes __No | _____            |
| _____   | _____ | __M __F | _____ | __Yes __No | _____            |

Have you ever had a pet that died at an early age, became lost, stolen or disappeared? yes no  
 If yes please explain the circumstances: \_\_\_\_\_  
 \_\_\_\_\_

Have you ever sold, given away or surrendered a pet to a shelter? yes no  
 If yes, please explain the circumstances: \_\_\_\_\_  
 \_\_\_\_\_

If you presently have a dog, is it current on vaccinations? At minimum, rabies/distemper/hepatitis, parvovirus and parainfluenza yes no not sure  
 If no or not sure, please explain: \_\_\_\_\_  
 \_\_\_\_\_

Is your dog currently up to date on his/her heartworm preventative? yes no not sure  
 If no or not sure, please explain: \_\_\_\_\_  
 \_\_\_\_\_

If you presently have a dog, where is it housed? inside outside both

Other than housetraining, have you ever trained a dog? yes no  
 If yes, what type of training? \_\_\_\_\_

The information I have provided in this application is true and complete. I understand that any misrepresentation of facts may result in removal by W.O.O.F. (Westies Of Ohio Fundraisers) of any dog placed by them.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please return this form to:**

**W.O.O.F.**  
**Westies Of Ohio Fundraisers**  
**670 White Tail Drive**  
**Gahanna, OH 43230**