

# Foster Application



**BRIGHTSIDE**  
ANIMAL CENTER

**Brightside Animal Center is dedicated to enriching the lives of displaced animals through quality care and adoption to responsible, loving homes.**

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

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_

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

Email: \_\_\_\_\_

Age: \_\_\_\_\_ (child/youth 12-15 must be accompanied by an adult)

Please check all that you are interested in

- |  |  |
|--|--|
| <input type="checkbox"/> Kittens (eating on their own)         | <input type="checkbox"/> Puppies                               |
| <input type="checkbox"/> Mama cat with nursing kittens         | <input type="checkbox"/> Mama dog with nursing puppies         |
| <input type="checkbox"/> Bottle-feeding kittens                | <input type="checkbox"/> Bottle-feeding kittens                |
| <input type="checkbox"/> Medical cases - cats                  | <input type="checkbox"/> Medical cases - dogs                  |
| <input type="checkbox"/> Behavior/socialization – cats/kittens | <input type="checkbox"/> Behavior/socialization – dogs/puppies |

What experience have you had fostering animals?

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Do you have access to a car or your own transportation? YES \_\_\_ NO \_\_\_

Are you available to bring the animals in for regular veterinary exams? YES \_\_\_ NO \_\_\_

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**As a Volunteer with Brightside Animal Center, I agree to:**

- Never strike an animal, or handle or treat an animal in such a way that would be construed as rough or abusive. I will always exercise compassion and care with animals.
- Hold absolutely confidential all information that I may obtain, directly or indirectly, concerning clients, animals and staff. I agree not to seek to obtain confidential information from a client. I understand that an intentional or unintentional violation of confidentiality may result in disciplinary action, including termination by Brightside Animal Center and /or possible legal actions by other (i.e., clients, customers)
- Become familiar with BSAC policies and procedures, and uphold their philosophy and standers. I will seek clarification from Volunteer Coordinator, or staff when required.
- Donate my services to BSAC without contemplation of compensation or future employment, and without liability of any nature on behalf of BSAC, all services to be performed by me are at my own risk.
- I recognize that in handling animals there exists a risk of injury including physical harm caused by the animal(s) and their surroundings
- Conduct myself with dignity, courtesy, and consideration for others, and strive to make my work professional in quality.
- Attend supplemental and advanced training whenever possible.
- Carry out my assignments in accordance with BSAC training, and seek assistance from Volunteer Coordinator or BSAC staff whenever necessary.
- Communicate and job related problems, concerns, differences of opinion, conflicts, or suggestions only to the Volunteer Coordinator or Executive Director.
- Adhere to sign-in and scheduling procedures.
- Notify the volunteer Coordinator if I choose to discontinue my volunteer services with BSAC.

**I understand that Brightside Animal Center reserves the right to terminate my volunteer status as a result of the following:**

- Any abuse or mistreatment of an animal.
- Failure to comply with organizational policies, rules and other regulations.
- Unsatisfactory attitude, work or appearance.
- Any other circumstances which, in the judgment of the Volunteer Coordinator and/ or Executive Director, would make my continued service as a volunteer contrary to the best interest of Brightside Animal Center

**On behalf of myself, my heirs, personal representatives and executors, I hereby release, discharge, indemnify and hold harmless BSAC, its agents, servants and employees from any and all claims, causes of action, or demands, of any nature or cause including costs and attorney's fees incurred in connection with the same, based on damages or injuries which may be incurred or sustained by me in any way connected with my services for BSAC, including, but limited to animal bites, injuries, property damage or veterinary fees.**

**Photo Release:**

I understand that public relations are an important part of volunteering at BSAC. On behalf of myself, my heirs, personal representative, and executors, I allow BSAC to use any photographs taken of me for use in public relations efforts.

Date: \_\_\_\_\_ Foster Signature: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_