



Canine Helpers for the Handicapped, Inc.

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Please visit us on line at: <http://CanineHelpers.NetFirms.com> - or - email us at: CHHDogs@AOL.com

Custom Trained Assistance Dogs
Beverly D. Underwood, Executive Director

FOSTER HOME APPLICATION

NAME: _____ PHONE: _____

ADDRESS: _____

LIST PEOPLE IN HOUSEHOLD AND AGES: _____

PLACE OF EMPLOYMENT: _____

WORK# : _____ CAN YOU BE CONTACTED AT WORK? _____

WHEN ARE YOU INTERESTED IN GETTING A PUPPY ? : _____

DO YOU HAVE A PREFERENCE IN A LARGE OR SMALL DOG ? : _____

HOW LONG CAN YOU FOSTER THE PUPPY ? : _____

NUMBER OF HOURS PUPPY WILL BE LEFT HOME ALONE: _____

WILL THE PUPPY LIVE IN THE HOUSE? _____ WHERE WILL THE PUPPY SLEEP _____

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DO YOU HAVE A FENCED IN YARD? _____

CAN YOU TAKE THE PUPPY PLACES FOR SOCIALIZING ? : _____

DO YOU TRAVEL A LOT? _____ IF YES, CAN THE PUPPY GO WITH YOU ? : _____

DO YOU HAVE ANY OTHER DOGS OR PETS ? : _____ PLEASE LIST: _____

ARE THEY OU TO DATE ON VACCINATIONS, WORMING, ETC. ? : _____

ARE YOU FAMILIAR WITH OBEDIENCE TRAINING ? : _____

WOULD YOU BE INTERESTED IN TAKING THE PUPPY TO TRAINING CLASSES ? : _____

I UNDERSTAND THAT I AM FOSTERING A PUPPY UNTIL THE AGE OF ONE YEARS OLD. IF FOR ANY REASON I CAN NO LONGER FOSTER THE DOG, I WILL RETURN THE PUPPY ONLY TO CANINE HELPERS. THE PUPPY WILL NOT BE GIVEN OR SOLD TO ANY PERSON OR INSTITUTION OF ANY KIND. I WILL PROVIDE THE PUPPY WITH ALL THE LOVE AND CARE A CANINE DESERVES.

DATE: _____ SIGNATURE: _____