

**MICHIGAN ORPHAN KITTEN RESCUE  
FOSTER CARE VOLUNTEER  
APPLICATION FORM**

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Name: \_\_\_\_\_ (must be 21 or older)

Phone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

List names and ages of other household members:

\_\_\_\_\_

\_\_\_\_\_

**1. Do you have your own transportation?**

Yes \_\_\_\_\_ No \_\_\_\_\_

*(It is sometimes necessary for kittens that have fallen ill to be taken to one of our vets ASAP. Although it is not absolutely necessary to have your own transportation to foster our kittens, it is important for us to know your situation if such an occasion arises).*

**2. Is your home cat and kitten-proof?** *(secure screens on windows and doors, no toxic plants etc)*

Yes \_\_\_\_\_ No \_\_\_\_\_

**3. Where in the home will the kittens mainly be kept?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*(It is important that kittens have a safe area for sleeping and for during playtimes when they are not being supervised. All kittens must be fostered inside your home).*

**4. Do you give Michigan Orphan Kitten Rescue permission to conduct a house inspection?**

Yes \_\_\_\_\_ No \_\_\_\_\_

If you rent, provide landlord's name and phone: \_\_\_\_\_

\_\_\_\_\_

**5. Are there any other animals living at your home?**

Yes \_\_\_\_\_ No \_\_\_\_\_

If so, what kind and how many? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**6. Are your pets current with vaccinations?**

Yes \_\_\_\_\_ No \_\_\_\_\_

*(Fosters will be required to provide current vaccination documentation for all other pets in the household. This protects both our kittens and your own pets).*

List veterinarian name and phone: \_\_\_\_\_

**7. Have you ever fostered kittens before?**

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list any organizations for which you fostered and the year.

\_\_\_\_\_

\_\_\_\_\_

**8. If you haven't previously fostered kittens before, have you ever had first-hand experience at raising a kitten?**

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, from what age \_\_\_\_\_

**9. Please rate the level of activity in your home.**

Quiet \_\_\_ Average \_\_\_ Active \_\_\_

**10. Are there any children in your home (including those who visit regularly)?**

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, list ages \_\_\_\_\_

**11. How much time each day can you dedicate to kitten care (playing, feeding etc)?**

\_\_\_\_\_

**12. Most litters range from between 3-7 kittens. How many kittens would you be prepared to foster at any one time?**

\_\_\_\_\_

**13. The age of kittens we receive ranges from 0-8 weeks. The younger they are, the more frequently they need to be fed. For very young kittens this may include around the clock bottle feeding. Below is a general guide to the different ages and feeding requirements. Check the age range of kittens you'd be able care for:**

- \_\_\_\_\_ 0-1 week old kittens (require bottle feeding every 2-3 hours around the clock)
- \_\_\_\_\_ 2-3 week old kittens (require bottle feeding every 4-5 hours around the clock)
- \_\_\_\_\_ 4-5 week old kittens (normally able to eat on their own/require feeding 4 or 5 times a day)
- \_\_\_\_\_ 6 weeks or older (able to eat on own/require feeding 3-4x a day)

**14. At times we need fosters who can foster a mother cat and her babies. In these circumstances it is preferable that the mother and her kittens are provided with their own room (as opposed to simply a secured area that might be suitable for kittens alone). This is because mother cats are normally very territorial and anxious about the safety of their babies. Would you be willing to foster a mother cat and her kittens and do you have a single secure room that you could provide for them?**

Yes \_\_\_\_\_ No \_\_\_\_\_

Please list any comments or questions:

\_\_\_\_\_

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**Waiver of Liability**

My signature to this volunteer liability release attests to my intent to hold harmless and release from all liability Michigan Orphan Kitten Rescue, or any of its past, present or future Officers, agents or volunteers, from all acts which are related to the normal performance of required and implied duties.

I fully understand the risk of bringing a foster animal into my home and take full responsibility for any damage a foster animal may cause. I do not expect Michigan Orphan Kitten Rescue to reimburse me for any damages caused by an animal that I choose to foster.

I understand that working with animals carries a risk of injury, and that it is possible that I may be bitten, scratched, and/or otherwise injured.

I fully recognize the possible dangers associated with the work of Michigan Orphan Kitten Rescue and I freely consent to this waiver. I understand that my services as a foster parent may be terminated at any time, with or without reason.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Emergency Contact Information**

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

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

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

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