



Shadow Husky Rescue, Inc.

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Foster Application

(please print clearly)

Name _____

Address _____

Home Phone _____ Cell Phone _____

Email _____

List of Pets Currently in Your Home

Dog(s) - # -- Female _____ Male _____

Spayed - Yes or No Neutered - Yes or No

Breed of Dog(s) _____

Do they get along with other dogs? Yes or No

Do you have any cats? Yes or No If yes, how many? _____

Do you have children? Yes or No If yes, please list ages: _____

Do you have a fenced in area? Yes or No If yes, how high? _____

Do your pet(s) have access to air conditioning on hot days? Yes or No

Do you plan to go on walks or to dog parks with your Husky for socialization and exercise? Yes or No

Do you prefer a male or female Husky? Male Female

Do you allow your pet(s) to sleep in bed with you or in the same room? Yes or No

What color Husky do you prefer? _____

Would you consider two (2) Huskies? Yes or No

Can we do a home check at your house? Yes or No

Will you leave your Husky outside for long periods of time while you are away or at work? Yes or No

If yes, will your Husky have access to the indoors during this time? Yes or No