

GREATER SWISS MOUNTAIN DOG RESCUE FOUNDATION FOSTER CAREGIVER PROFILE



Name(s) of Adult(s): _____

Address, City State Zip: _____

Phone Numbers: Home: _____ Cell: _____ Wk: _____

Email Address(es): _____

About the home environment in which the Swissy will be fostered:

Number of children living with or regularly visiting you: _____ Ages of children: _____

How many years have the adults owned dogs? _____

Please list any dogs currently living in your household:

<u>Age</u>	<u>Breed/Temperament (eg submissive, alpha, etc.)</u>	<u>Sex</u>	<u>Spayed/Neutered?</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please list any other pets in your household that the foster dog would come into contact with:

Do you live in/on (circle one): Ranch/Acreage Single Family Home Townhome/Condo Apartment Other

If you have a fenced yard, how tall is the fence & what is it constructed of? _____

How do you plan to exercise and socialize the foster dog? _____

Where will the foster dog be during the day and where will it sleep at night? _____

Have you ever owned a Swissy before? If yes, please explain:

Is anyone in your household a: Vet or Vet Tech _____ Professional Dog Trainer _____

Would you foster a special needs Swissy? (circle all that apply):

Dominant (Alpha) Dog	Dog-Aggressive Dog	Separation Anxiety
Blind Dog	Deaf Dog	Arthritic or Dysplastic Dog
Incontinent Dog	Fear of Humans	Other Medical Issue(s): _____

With which of the following do you have actual experience (circle all that apply):

Dominant (Alpha) Dogs	Aggressive Dogs	Separation Anxiety
Serious Health Issues	Blind or Deaf Dogs	Senior Dogs
Showing Dogs	Owning a Swissy	Owning a Large Breed Dog (90+ lbs)

All attempts are made to pay any veterinary bills with a rescue credit card, but while fostering you may be asked to initially pay for some veterinary expenses and then submit the receipts to GSMD Rescue for reimbursement. If necessary are you willing to do this? _____

All dogs are spayed/neutered, brought up to date on shots, and microchipped prior to placement. A foster home is also required to help screen potential homes. Are these things that you are willing/able to do? _____

Please list your vet's contact information. Rescue will contact your vet to request a rescue discount, arrange payment and provide any information or foundation paperwork required.

Name of Facility: _____ Vet's Name: _____

Phone: _____

I certify that my statements and answers to these questions are true and correct.

Date

Printed Name

Signature

Return via e-mail: rescue@gsmdrescue.org
 Or fax to: 941-761-5702
 Or, mail to: GSMD Rescue Foundation
 c/o Pat Saxon
 19010 70th Avenue East
 Bradenton, FL 34211