



# BellyRubs Basset Rescue Foster Home Application

**So that we may properly assess your capabilities, please answer the following questions as completely as possible. Please let us know about any special needs or questions you may have. Thank you.**

Enter Your Name (Husband & Wife, if married): \_\_\_\_\_

Your Street Address: \_\_\_\_\_

City: State: Zip Code: \_\_\_\_\_, \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

What are your typical work hours?

\_\_\_\_\_

Do you own or rent your home? Own \_\_\_\_\_ Rent \_\_\_\_\_

What type of dwelling is it? House \_\_\_\_\_ Condo \_\_\_\_\_ Apartment \_\_\_\_\_ Mobile home \_\_\_\_\_

Do you have a fenced area for the dog? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, type of area: Kennel \_\_\_\_\_ Yard \_\_\_\_\_

Type of fencing and approximate dimensions: \_\_\_\_\_

\_\_\_\_\_

If not, what arrangements will you have for the basset's exercise and toilet duties? \_\_\_\_\_

\_\_\_\_\_

Have you ever owned a dog before? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what breed(s) have you owned? \_\_\_\_\_

\_\_\_\_\_

Have you ever owned a basset hound before? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you presently own any other animals? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, please list all animals in the home, including the sex, breed: \_\_\_\_\_

\_\_\_\_\_

Are any of your animals altered? Yes \_\_\_\_ No \_\_\_\_  
How long you have you owned your other animals? \_\_\_\_\_  
\_\_\_\_\_

How many adults are in your household? \_\_\_\_\_

How many children are in your household? \_\_\_\_\_

What are the ages of your children? \_\_\_\_\_

How do other family members feel about fostering a basset? \_\_\_\_\_  
\_\_\_\_\_

Is anyone home during the day? Yes \_\_\_\_ No \_\_\_\_

Is anyone home at night? Yes \_\_\_\_ No \_\_\_\_

Is anyone in the home allergic to dogs? Yes \_\_\_\_ No \_\_\_\_

Where will the basset hound be kept during the day? \_\_\_\_\_

Where will the basset hound be kept at night? \_\_\_\_\_

When you are away from home? \_\_\_\_\_

Are you established with a vet (as a reference)? Yes \_\_\_\_ No \_\_\_\_

If yes, please provide your vet's

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

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

City: State: Zip Code: \_\_\_\_\_, \_\_\_\_\_

And your vet's and phone number: \_\_\_\_\_

Personal references:

\_\_\_\_\_  
Name Phone #

\_\_\_\_\_  
Street address City St Zip

\_\_\_\_\_  
Name Phone #

\_\_\_\_\_  
Street address City St Zip

\_\_\_\_\_  
Name Phone #

\_\_\_\_\_  
Street address City St Zip

Are you willing to house train a basset hound, if necessary? Yes \_\_\_\_ No \_\_\_\_

Sometimes we have Special Needs basset hounds that may be harder to place.  
Are you willing to foster a dog with any of the following traits? [mark all that apply]  
Senior dog [6+ years] \_\_\_\_ basset mix \_\_\_\_ basset with special medical needs \_\_\_\_

Do you agree to home visits from the West Tennessee Valley Basset Rescue personnel, and phone calls to check on the welfare of the basset hound? Yes \_\_\_\_ No \_\_\_\_

Please let us know about any special needs or questions you may have. \_\_\_\_\_

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**All of the information I have provided on this application is to the best of my knowledge, true and complete. I understand that falsifying answers on this application, or at any other time during the approval process, disqualifies me from being a foster home.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please mail or e-mail this application to the nearest BellyRubs Foster Home Coordinator at the addresses below:**

<b>BellyRubs Basset Rescue</b>	<b>BellyRubs Basset Rescue</b>
<b>c/o Clara Jackson</b>	<b>c/o Leanne Potts</b>
<b>PO Box 335</b>	<b>PO Box 23332</b>
<b>Victoria, MS 38679</b>	<b>Knoxville, TN 37933</b>
<b>Phone: 662-838-4732</b>	<b>Phone: 865-228-2460</b>
<b>e-mail: bellyrubsbr at bellyrubs.org</b>	<b>e-mail: easttnfoster at bellyrubs.org</b>

(replace "at" with @ and remove spaces)