

Foster Program

Application

Age Policy

You must be at least 15 years of age to volunteer and we ask for a 6 month commitment from our regular volunteers. Most regular volunteers will average one day a week, from 2-4 hours a day, on a designated day and time slot scheduled by the volunteer coordinator. Please note that all volunteers will need to sign a release form; volunteers under 18 years of age will need to have a parent or legal guardian sign.

The MRFRS is a nationally recognized, non-profit volunteer-driven organization committed to ensuring the health and welfare of feral and domestic cats and kittens by promoting pro-active, compassionate, no-kill programs.

63 Elm Street (Route 110)
Salisbury, MA 01952
phone: 978-462-0760
fax: 978-463-6826
info@mrfrs.org
www.mrfrs.org



The Merrimack River Feline Rescue Society

Caring for Cats in Need

Name: _____

Email: _____ Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Mobile Phone: _____

Your Age: _____ Occupation: _____

What is the best way to reach you? _____

Why would you like to foster for MRFRS? _____

Have you ever volunteered for MRFRS before? Yes No

If yes, what were your volunteer duties? _____

Have you ever adopted a cat or kitten from MRFRS before? Yes No

If yes, when? _____

Type(s) of cats you're interested in fostering:

- | | | |
|--|---|--|
| <input type="radio"/> Friendly adults | <input type="radio"/> Medical quarantines | <input type="radio"/> Sick or injured |
| <input type="radio"/> Feral adults | <input type="radio"/> Mom w/ babies | <input type="radio"/> Bottle babies |
| <input type="radio"/> Friendly kittens | <input type="radio"/> Feral kittens | <input type="radio"/> FeLV+ cats/kittens |

Have you fostered cats and/or kittens before? Yes No

If not, what experience have you had with cats and/or kittens that would be helpful in fostering? _____

I live in a: House Apartment Condo Other, Specify: _____

If you rent, do you have permission from your landlord to have pets?

Yes No Unsure

Do you have a separate room (away from other animals), where your foster cat(s)/kitten(s) can stay? Large bathroom Closed off room Kitchen

Other, specify: _____

Are all members of your household aware that you're interested in fostering for MRFRS?

Yes No Unsure

Are there any children in your household? Yes No Ages? _____

Do any members of your household have allergies? Yes No Unsure

How many hours per day will your foster cat(s)/kitten(s) be without adult care/supervision? _____

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I am willing to foster cats/kittens for:

- 1-2 weeks at a time 2-4 weeks at a time 4+ weeks at a time
 8+ weeks at a time It varies depending on the time of year, explain:

Would you be willing to foster a cat or kitten with known behavioral issues (ie. biting/scratching, urinating/defecating outside the box)? Yes No

If yes, are you willing to work with your foster cat or kitten on these issues with support from MRFRS?

- Yes No Unsure

Medicating cats and kittens:

- I can give liquid medication orally I can give pills orally
 I can do SQ injections I can do SQ fluids
 I can force feed I am willing to learn
 I am not comfortable medicating cats/kittens

Can you/are you willing to learn to take a cat or kitten's temperature? Yes No

What would you do if the cat(s)/kitten(s) in your care escape or got outside? _____

What pets do you presently own, or have you had in the past, if any?

Name: _____ Age: _____ Species: _____

Spayed or Neutered Yes No Declawed Yes No

Current on rabies vaccinations Yes No Deceased Yes No

Name: _____ Age: _____ Species: _____

Spayed or Neutered Yes No Declawed Yes No

Current on rabies vaccinations Yes No Deceased Yes No

Other: _____

In the event of an emergency, would you be able to get to the shelter or an emergency room on short notice for medical care? Yes No

Are you okay with the fact that some animals will not survive or may have to be euthanized, due to health reasons this is always a possibility, and that this decision is ultimately up to MRFRS staff? Yes No

Do you understand that anyone interested in adopting your foster animals (including yourself) must go through the standard MRFRS adoption process, including payment of fees, and approval of candidates and placement of cat(s)/kitten(s) is up to the MRFRS staff? Yes No

I have answered the questions above truthfully & completely. I understand that although MRFRS takes reasonable care to screen cats/kittens for foster care placement, it makes no guarantee relating to the health of a cat/kitten, behavior, or action. I understand that I receive foster care cats/kittens at my own risk and can reject or return any cats/kittens for which MRFRS has asked me to provide care. I indemnify and hold MRFRS free and harmless from all liability arising out of any and all claims, demands, losses, damages, action, judgment of every kind, and description, which may occur to or be suffered by me, members of my household, or any third parties by reason of activities arising out of this agreement.

Signature: _____

Name: _____ Date: _____

Volunteer Program

Release Form

Since many of the cats and kittens we work with often have unknown histories, we advise you to consider being vaccinated against rabies. This is your option, not a requirement.

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The Merrimack River
Feline Rescue Society
Caring for Cats in Need

I, (print your name) _____ hereby agree to accept a position as a volunteer at Merrimack River Feline Rescue Society (hereinafter referred to as "MRFRS"), and in doing so, I agree to comply with all of the policies, rules, and regulations which may be established from time to time by the MRFRS. I understand that failure to do so may result in my immediate termination as a volunteer.

I acknowledge that my services are provided strictly on a voluntary basis, without any pay or compensation of any kind, and without any liability of any nature on behalf of MRFRS, all services to be performed by me at my own risk.

I recognize that in handling animals and performing other volunteer task, there exists a risk of injury including physical harm caused by the animals. On behalf of myself, my heirs, personal representatives, and executors, I hereby release, discharge indemnify, and hold harmless MRFRS, its agents, servants, and employees from any and all claims, causes of action, or demands, of any nature or cause, including costs and attorney's fees incurred, or sustained by me in any way connected with my services for MRFRS, including, but not limited to, animal bites, scratches, accidents, or injuries.

I agree to release, discharge, indemnify, and hold the MRFRS harmless for any and all damage or loss to my personal property while performing my volunteer services for the MRFRS in a voluntary capacity.

I understand MRFRS recommends I receive a pre-exposure rabies vaccination series if working directly with cats. I understand that I am responsible for the cost of the pre-exposure series.

Volunteer signature:

_____ Date: _____

Signature of Volunteer Parent or Guardian if Volunteer is a Minor:

_____ Date: _____

Signature of MRFRS Representative:

_____ Date: _____