



# NEVER CRY WOLF RESCUE & ADOPTIONS

*“Little Red Riding Hood lied!”*

601 Douglas Blvd.  
Roseville, CA 95678

**Phone:** (916) 595-9653

**Email:** ncwolfadoptions@yahoo.com

## FOSTER APPLICATION

Instructions: Please print, fill out and sign this form. You can either mail to us or send it to us an attachment via email to ncwolfadoptions@yahoo.com.

**You must have a USDA license for full-bloods.**

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### *Name and Address Information*

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

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip code:** \_\_\_\_\_

### *Contact Information*

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

**Mobile:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

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

### *Additional Personal Information*

**Driver's License #:** \_\_\_\_\_ **Over 18 years of age?**  Yes  No

**Occupation:** \_\_\_\_\_ **Hours Normally Worked?** \_\_\_\_\_

### *Names and ages of all occupants in your home:*

**Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_

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

***Personal Veterinary Information***

Veterinarian: \_\_\_\_\_

Name of Clinic: \_\_\_\_\_

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

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

Would your veterinarian be treating the wolf-dog?  Yes  No

Is your veterinarian experienced with wolf-dogs?  Yes  No

***Questionnaire***

Please answer all of the following questions.

Please describe the kind of animal you are interested in adopting:

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Age / Sex of animal you are looking for: \_\_\_\_\_

Reason for preference: \_\_\_\_\_

Please list all pets that live in or around your household. Please name the age, kind of animal it is and the animal's temperament. If more space is needed, please list on a separate piece of paper and affix with form.

1. Kind of animal: \_\_\_\_\_ Age: \_\_\_\_\_

Temperament: \_\_\_\_\_

2. Kind of animal: \_\_\_\_\_ Age: \_\_\_\_\_

Temperament: \_\_\_\_\_

1. Have you owned a wolf or wolf-dog before?  Yes  No

Please list the kind of animal you owned and what happened to them.

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2. Do you have experience with dogs that have had physical, mental or behavioral problems?  Yes  No
3. Would you be willing to foster a dog with behavioral problems?  Yes  No
4. Do you rent or own your own home?  Rent  Own
5. If renting, do you have your landlord's permission to have a large dog?  Yes  No
6. Do you have a backyard?  Yes  No
7. Is your backyard fenced?  Yes  No
8. Is your backyard fence a wood fence?  Yes  No

How high is your fence: \_\_\_\_\_

9. Are there any community restrictions on dogs?  Yes  No
10. Do you live in a community such as a Home Owners Association?  Yes  No
11. Are you open to a home inspection?  Yes  No
12. Would you be willing to take a Wolf Education class?  Yes  No
13. Have you checked with code enforcement to see if they are legal where you are  Yes  No
14. Do you have a doggie door?  Yes  No

What size is the doggie door? \_\_\_\_\_

How will your new animal spend its days? (Circle all that apply)

- Indoors                      → Crated                      → Basement                      → Garage
- Porch                          → Locked in room              → Fenced Yard                  → Loose/unfenced
- Tied outside                  → Dog house                      → Kennel run

Other: \_\_\_\_\_

Other: \_\_\_\_\_

How will your new animal spend its nights? (Circle all that apply)

→ Indoors

→ Crated

→ Basement

→ Garage

→ Porch

→ Locked in room

→ Fenced Yard

→ Loose/unfenced

→ Tied outside

→ Dog house

→ Kennel run

Other: \_\_\_\_\_

Other: \_\_\_\_\_

All of the information provided, on this application, is true and correct. If any of the information changes, I will promptly advise you.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_