



PO Box 25679
 Columbia, SC 29224
 803.788.7063
info@paals.org
www.paals.org

Weekend Foster Application

Full Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone(s): Home: _____ Work: _____ Cell: _____

Emergency Contact Name/Number _____ / _____

Email: _____

What name do you prefer we use for correspondence and certificates? _____

1. Have you ever personally obedience-trained a dog? yes no
 If yes, in classroom Facility Name: _____ at home?
2. Have you had primary responsibility for pupsitting a puppy? yes no
3. Names and relationships of household members involved in raising a puppy:

Primary Raiser	Occupation	Age
Other Raiser's Names	Relationship	

4. Are all family members in agreement and excited about assisting in raising a PAALS puppy? Yes no
5. Is anyone allergic to animals? yes no
6. Will you take either male or female? ? yes no
 If there is a restriction, please state which gender you need and why.

7. Do you have other dogs? yes no Breed: _____
 Gender: Female Male
 Neutered/Spayed? yes no



8. How do your present dogs react to other people?

9. How do your present dogs react to other DOGS?

Are they inside or outside dogs? Inside Outside

**** Note: Our puppies must be raised as house dogs. ****

10. Do you have other animals? Yes No How many and what kind?

11. Please tell us about your history of dog ownership, kinds of dogs, what became of them, obedience training completed, etc. _____

12. How many hours each day will the puppy be left alone? _____

13. Where will the puppy be kept when you aren't at home? _____

14. Growing puppies need 20 minutes of fast walking or vigorous play twice a day, in addition to many hours of interaction with the family. Are you willing to provide daily exercise ?

yes no

15. Will you agree to always keep the puppy on a lead or supervised within an enclosed area when it is outdoors? yes no

16. **Weekend raisers are required to participate in weekly Friday afternoon training sessions from 4:30-6:00pm at Capital Senior Center in downtown Columbia. At the end of each session weekend raisers will take the PAALS puppy home. Weekend raisers are required to fill out a weekend report and return the puppy to Paws Paradise Monday morning or Northeast Columbia Sunday evening. Are you willing to do this?**

yes no

17. **One weekend outing a month is required with PAALS group and trainers. Are you willing to commit to this?** yes no

18. What kind of home do you have? Farm Rural Town City

19. Are you willing to follow all of the PAALS' rules and recommendations? yes no



20. Is the family willing to commit to a full weekend(or several evenings) of foster training before you get a puppy yes no

21. Please tell us why you want to raise a PAALS puppy. _____

22. Did you learn about the PAALS puppy raising program? _____

23. Do you feel that you will be able to emotionally handle the separation when the puppy is returned to PAALS for formal training? yes no

24. Please give a dog related reference such as a veterinarian (required if you have pets), obedience instructor or breeder.

Name: _____ Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone(s): _____

Please give a personal reference such as a PAALS puppy raiser or volunteer.

Name: _____ RELATIONSHIP: _____

Phone(s): _____

Statement:

I have studied general information about the PAALS pusitter program and I understand the commitment of time, money and love involved in pusitting. Please accept my application to become a PAALS pupsitter.

Signature: _____ Date: _____

Please return to:
PAALS - P.O. Box 25679, Columbia, SC 29224