Patrons:
Jenny Seagrove
Archie Norman
Vicky Payne BVetMed MRCVS
Jay Postones
Isobel McGlashon
Jackie Meager

APPLICATION TO HELP ESSW

Please complete in block capitals

Name: Address: Postcode: Phone: Email: Your age group: Under 25 26/40 41/65 66/75 75+
Are you willing for a Co-ordinator to visit you and explain the procedures and the work? Yes No
I can offer help with: Fostering Dog assessments Home checks Transporting Fund raising Administration tasks Secretarial tasks IT/Web tasks

If applying to help with fostering, please complete the following section

Composition of family living at home, including ages		
Who would be responsible for exercising/training the foster dog?		
Have you had a dog previously or currently?	YES/NO	*If yes, what breed, age and sex, and are they neutered?*
Do you have experience of ESS and their needs?	YES/NO	
Do you have any other pets?	YES/NO	*If yes, what are the other pets?*
Is someone at home all day?	YES/NO	*If no, for how long will the dog be left alone?*
Are there any sheep, cattle or poultry nearby?	YES/NO	*If yes, give details*
Do you have a preference for:	Dog Bitch Either Minimum age _____ Maximum age _____	
Veterinary Practice name: Address: Postcode: Phone: *May be used as a reference and to set up an ESSW account for treatment during fostering*		
Any other details/information you think would be useful.		

Signature ……. Date …….

Return forms to Sandy Waldon, Higher Orleigh Lodge, Buckland Brewer, Bideford, Devon EX39 5EH ~ 07583 346976
natcoord@essw.co.uk