

FOSTER CARE APPLICATION & AGREEMENT

Date:				
Name:				
Address:				
City:			State:	Zip:
Is this address: Permar	nent 🗆 Seasonal: 1	If seasonal when	are you in AZ?	
Do you: 🛛 Own	□ Rent: If rent please	provide copy of l	ease that states you	may have animals
Do you have an HOA? 🗆 `	Yes □ No If so, what	t is the limit of how	w many animals you	may have:
Phone Numbers:				
Home:	Cell:		Work:	
Email Address:				
Are there children in your h	nome? □ Yes □ No !	If so, how many:_	What ages	:
Do you currently have pets	∷⊡Yes □No	Number of: Ca	ats Dogs	Other
Are your dogs licensed:	Yes 🗆 No			
Are they current on rabies	vaccinations:	□ No	Boosters:	□ No
Please circle any diseases	your household pets m	ay have had: Par	vo, Distemper, Felin	e Leukemia, FIV
Other:			When:	
Do you have a doggie doo	r: □ Yes □ No			
What do you prefer to care	for (please check all the	at apply):		
□ Adult Cats	□ Kittens		□ Nursing Mom wi	th Kittens
Are you willing to foster a k	kitty that needs training:	□Yes □No		
Are you willing to foster a k	kitty with medical issues	: 🗆 Yes 🗆 No		
Are you willing to foster a k with administering medicat		ation: 🗆 Yes 🛛	No If yes, please	detail your prior experience

Would you foster multiple kitties? Yes No If so, how many:				
Will your foster kitty/kitties be housed separately from owned animals:				
How many hours a day will your foster kitty/kitties be left alone:				
What enrichment activities will the foster kitty/kitties receive:				

Are you willing to foster a kitty or litter until it/they are adopted:
Yes No

I agree that my services as a Foster Care Provider are provided on a strictly volunteer basis. I shall receive no pay, benefits, or compensation of any kind from Safe Haven for Animals for my foster care of animals.

I agree to provide foster care in strict compliance with the policies and procedures of Safe Haven for animals. This includes, but is not limited to:

- Providing adequate food, water, shelter, safe containment, and humane treatment for the kitty/kitties at all times.
- Providing medication and veterinary care when needed at the expense of Safe Haven for Animals and with their approval beforehand.
- Monitoring the kitty/kitties and providing proper care and socialization.
- ✔ Notifying Safe Haven for Animals immediately of any major change in the foster kitty/kitties health.
- Immediately notifying Safe Haven for Animals if a kitty becomes lost.
- Attendance of kitty/kitties at adoptions events.
- Allow a transporter to take kitty/kitties to adoption events if you are unable.
- Representing yourself in a professional manner.

Please write your initials on the line to the left of each paragraph after you have read it.

_____ Safe Haven for Animals reserves the exclusive right to determine the proper course of action to take upon notification by the foster parent of any inability to comply with this agreement.

_____I understand and agree that the fostered kitty/kitties are the exclusive property of Safe Haven for Animals. This agreement transfers no ownership rights, and Safe Haven for Animals may remove a foster animal at any time if it's deemed the best course of action for the animal by Safe Haven for Animals.

____I agree that at NO time the foster kitty/kitties will be allowed to go outside, supervised or unsupervised.

_____I understand that all foster animal(s) must be scheduled for needed medical treatment (altering, vaccinations, microchip, testing, etc) at one of the Safe Haven for Animals approved veterinarians, and no animal is ever allowed to conceive, become pregnant, or impregnate another animal while in foster care.

_____I will respect Safe Haven for Animals decision to determine whether a foster parent can adopt a foster kitty/kitties.

____I understand that I must comply with the following adoption protocol:

Safe Haven for Animals requires Adoption Application review and approval by the Director of SH or a designated appointee prior to any scheduled home visit.

- Safe Haven for Animals requires a home visit by the Director of SH or a designated appointee prior to the finalization of any adoption.
- In no case will an animal be allowed to leave an adoption event with a prospective adopter without approval by the Director of SH.
- Safe Haven for Animals requires that any SH kitty that needs to be rehomed for <u>any</u> reason at <u>any</u> time after adoption MUST be returned to Safe Haven for Animals.

____I agree to vaccinate my own animals against the following diseases before fostering:

Canines are immunized against Canine Distemper, Canine Parvovirus, Parainfluenza, Hepatitis (4 in 1 booster); Bordetella (kennel cough); Rabies; and are free of parasites.

Felines are immunized against Feline Panleukopenia, Rhinotracheitis, Calicivirus (3 in 1 booster); and are free of parasites.

_____If I choose to not vaccinate my animals, I understand that Safe Haven for Animals will not be responsible for any illness that occurs related to non-vaccinated animals.

_____I understand that foster kitty/kitties may carry contagious disease that could affect owned animals or humans. I understand that Safe Haven for Animals will not be responsible for any expenditures resulting from this.

_____I understand no reimbursement by Safe Haven for Animals will be given to me regarding any expenditure, which I incur for the care and treatment of the foster kitty/kitties that was not approved in advance by the Executive Director.

_____I understand if a foster kitty/kitties under my care or my own animal dies from a contagious disease, I may not be considered for fostering other animals of the same species for a specific length of time as deemed suitable by Safe Haven for Animals. Discussion with a Safe Haven for Animals approved veterinarian will determine the length of time necessary before fostering any animal again in the foster provider's home.

_____I understand that I may not rescue an animal without prior approval from Safe Haven for Animals.

_____I understand that any breach of the conditions of this foster care agreement may result in immediate termination of this agreement. In that case, Safe Haven for Animals shall take immediate possession of the fostered animal(s).

Indemnity

_____I agree to release, discharge, indemnify and hold harmless Safe Haven for Animals, including its agents and employees, for any personal injuries or damages to property or pets caused by the foster animal(s).

_____I recognize that in handling foster animal(s) there exists a risk of injury including physical harm caused by a foster animal. On behalf of myself, my heirs, personal representatives and executors, I release, discharge, indemnify and hold harmless Safe Haven for Animals, its agents, volunteers, and employees from any and all claims, causes of action or demands, or ay nature of cause connected with my foster care agreement.

I have received, read and understand the Foster Care Guidelines provided by Safe Haven for Animals.

Foster Care Provider Signature

Safe Haven for Animals Representative Signature

Date

Date