

## **Foster Home Agreement**

l,		to foster animals in or at my home located at for FACILITATE RESCUE, INC., hereafter	
referred	d to as "FRI".		
I may be contacted at the following: HOME PHONE		WORK PHONE	
CELL PHONE		EMAIL	
support		volving to provide excellent foster pet care, enthusiastic reproach. To ensure the well-being of my foster pets, I g:	
1.	"owned" by FRI at all times until a legal, binding co	law, considered "property" and as such my foster pet is intract for the adoption of the animal is completed. I agree <b>y</b> upon request by my FRI coordinator or other authorized	
2.	RISKS — I understand that working with stray animals carries a risk of exposure to rabies and zoonotic diseases. I agree to maintain my foster pet in areas separate from my own pets. If I opt to integrate my fosters with any other pets, I understand that I alone will be responsible for any damages or costs for services or treatment resulting from the integration. Foster Initial:		
3.	MOVING FOSTERS – I understand that I am responsible for care of my foster and agree that I will not allow another person to care for or have custody of my foster unless I have obtained permission from my coordinator. Foster Initial:		
4.		foster pets during any interaction with children (my own ireas to reduce the chances of mutual harm. Foster Initial:	
5.	<del>-</del>	ator to visit my home prior to placing pets with me and to e that FRI may require that I make changes relating to the care for my foster pets. Foster Initial:	
6.	PROPER CARE & SUPPLIES – I agree that my fost	er cat will be kept <b>inside only.</b> I agree to provide regular	

access to adequate fresh food and water. I understand that, whenever possible, FRI will make donated food and supplies available to me. When donated supplies are not available, I am responsible for supplying food and litter. I will provide clean litter boxes (scooped daily) for my foster. I will transport my foster in an animal

	carrying cage manufactured for this use to make sure that they are so IMMEDIATELY in the event of potential health issues, e.g.: sneezing, cough	ning, red/watery eyes, weight loss,	
7.	MEDICAL CARE — I agree to maintain my foster pet's medical statu communicated to me by my coordinator. I agree to attend clinics, verinstructed by my coordinator. I understand that I alone am responsible preceives that has not been expressly approved by my coordinator. I will instructions are followed, including the proper storage and administration.	is as instructed by FRI's vet as t appointments, and spay day as for the cost of any care my foster I see to it that the veterinarian's	
	I understand and agree that I am solely responsible for any medical care re I am responsible. This will include a cat being attacked by my (or a fos resulting from being allowed outdoors (intentional or not and unknown odryer or washer which is then turned on, and any such injury that is a direct Initial:	ter) dog, a cat sustaining injuries r not), a cat getting into a clothes	
8.	PROPER CONDUCT — I acknowledge that as an approved foster home I must volunteers. I recognize the importance of a good public image for FRI and our standards. I agree to treat my fellow volunteers with the respect they	d will never willingly compromise	
9.	. <b>ADOPTION OF FOSTERS</b> – I understand that any person interested in adopting a foster in my custody must go through the normal channels, i.e.: fill out an application, interview with a trained counselor, be approved as a match for the foster, pay a fee and complete a contract. If I desire to adopt one of my fosters, understand that I must follow this adoption process and must complete a contract and pay the adoption few within 30 days of informing my coordinator of wishing to adopt (and being approved to adopt that particula foster. Foster Initial:		
	NON-COMPLIANCE – Non-compliance will result in my being required to to my coordinator within 48 hours of such a request being communicated member. Foster Initial:		
FOSTE	R APPLICANT:		
Signatu	ure	Date	
Signature		Date	
For FA	CILITATE RESCUE, INC.:		
Signatu	ure	Date	
Addres	ss of Foster:		