**A blue and orange logo with paw prints

Description automatically generated**

**Foster Home Agreement**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, agree to foster animals in or at my home located at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for FACILITATE RESCUE, INC., hereafter referred to as “FRI”.

I may be contacted at the following:

**HOME PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ WORK PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CELL PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I recognize that I am joining a team that is constantly evolving to provide excellent foster pet care, enthusiastic support among its volunteers, and public service above reproach. To ensure the well-being of my foster pets, I confirm by initialing each item that I agree to the following:

1. **OWNERSHIP** – I understand that animals are, by law, considered “property” and as such my foster pet is “owned” by FRI at all times until a legal, binding contract for the adoption of the animal is completed. I agree that I will relinquish possession to FRI **immediately** upon request by my FRI coordinator or other authorized agent of FRI. Foster Initial: **\_\_\_\_\_\_\_\_**
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. **SUPERVISION** – I agree to closely supervise my foster pets during any interaction with children (my own included) and to supervise children in my foster areas to reduce the chances of mutual harm. Foster Initial: **\_\_\_\_\_\_\_\_**
5. **AT-HOME VISITS** – I agree to allow an FRI coordinator to visit my home prior to placing pets with me and to allow scheduled visits on short notice. I recognize that FRI may require that I make changes relating to the care of my fosters to enable me to better care for my foster pets. Foster Initial: **\_\_\_\_\_\_\_\_**
6. **PROPER CARE & SUPPLIES** – I agree that my foster cat will be kept **inside only.** 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 safe. *I will notify my coordinator IMMEDIATELY in the event of potential health issues, e.g.: sneezing, coughing, red/watery eyes, weight loss, diarrhea, failure to eat for more than one 24-hour period.* Foster Initial: **\_\_\_\_\_\_\_\_**
7. **MEDICAL CARE** – I agree to maintain my foster pet’s medical status as instructed by FRI’s vet as communicated to me by my coordinator. I agree to attend clinics, vet appointments, and spay day as instructed by my coordinator. *I understand that I alone am responsible for the cost of any care my foster receives that has not been expressly approved by my coordinator.* I will see to it that the veterinarian’s instructions are followed, including the proper storage and administration of medication. Foster Initial: **\_\_\_\_\_\_\_\_**

I understand and agree that I am solely responsible for any medical care resulting from an accident for which I am responsible. This will include a cat being attacked by my (or a foster) dog, a cat sustaining injuries resulting from being allowed outdoors (intentional or not and unknown or not), a cat getting into a clothes dryer or washer which is then turned on, and any such injury that is a direct result of my inattention. Foster Initial: **\_\_\_\_\_\_\_\_**

1. **PROPER CONDUCT** – I acknowledge that as an approved foster home I must always set an example for other volunteers. I recognize the importance of a good public image for FRI and will never willingly compromise our standards. I agree to treat my fellow volunteers with the respect they deserve. Foster Initial: **\_\_\_\_\_\_\_\_**
2. **ADOPTION OF FOSTERS** – 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, I understand that I must follow this adoption process and must complete a contract and pay the adoption fee within 30 days of informing my coordinator of wishing to adopt (and being approved to adopt that particular foster. Foster Initial: **\_\_\_\_\_\_\_\_**

**NON-COMPLIANCE** – Non-compliance will result in my being required to return my fosters and all supplies to my coordinator within 48 hours of such a request being communicated to me by my coordinator or board member. Foster Initial: **\_\_\_\_\_\_\_\_**

**FOSTER APPLICANT:**

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**For FACILITATE RESCUE, INC.:**

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address of Foster: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**