

Foothills Humane Society

989 Little Mountain Rd., Columbus, NC 28722
828-863-4444

VOLUNTEER - Foster Care Agreement

Foothills Humane Society Foster Care Contact Information:

To schedule clinic appointments, call 828-863-4444

For general assistance and after-hour emergencies, call (to be advised once you start fostering)

Foster Caregiver Name _____ Foster Date _____

As a volunteer and foster caregiver for Foothills Humane Society (FHS), I agree to the following terms and conditions (please initial each):

Medical Needs

- If the foster animal is in need of veterinary attention, shows any signs of illness, or is lost or injured, I agree to **immediately** contact one of the numbers listed above.
- All medical treatments must be authorized by FHS in advance. I understand that FHS will make decisions about veterinary care to be provided to the animal based on the prognosis. I will be responsible for the cost of any unauthorized veterinary care.
- I agree to properly administer any required medications for each animal.
- I understand that FHS will inform me of any known medical conditions with the animal(s). However, FHS cannot be responsible or liable for any unforeseen health problems. I understand that I will be responsible for any veterinary treatment for my own pet that may result from exposure to foster animals.
- I agree to bring the animals back to the shelter for vaccinations, spay/neuter surgery, or other scheduled vet appointments.

In-home Care

- Everyone in the household knows about and agrees to fostering the animal(s) in the home.
- I agree to provide daily food, fresh water, and a litter box for cats at all times. I also agree to maintain a high level of cleanliness in their living environment.
- I agree to provide attention and affection to the animal(s). For dogs, I will provide a minimum of three daily walks or yard time.
- I agree to keep foster animals isolated from my own pets unless specifically agreed to by a FHS Coordinator.
- I agree to keep the animal(s) indoors. Dogs must be on a leash at all times when out of the house. Cats must be transported in a secure carrier. In the event that the animal(s) get loose, I will contact FHS at once.

- I agree to provide updates on how the animals are doing should a FHS representative contact me. I am also willing to allow an FHS representative to visit my home at a mutually convenient time.
- I assume full responsibility for any property damage the foster animal(s) may cause.
- I understand that if the care of the animal(s) is to be transferred to any other individual that I must contact FHS in advance for approval.

Returning Animals to FHS

If I am unable or no longer want to care for the animal(s), I agree to contact FHS immediately and if no emergency exists, I will give FHS 72 hours notice prior to returning the animal(s) to the shelter. FHS agrees to accept animal(s) back upon request.

I agree that FHS representatives may remove the animal(s) at any time for veterinary care or other purposes.

I agree to return the animals to FHS upon completion of designated foster term.

Finding Homes for Animals

I understand that I may find suitable permanent adoptive homes for the animals, however;

- All animal adoptions must be processed through FHS.
- All animals must be spayed or neutered by FHS and before adoption is finalized.

If there is interest in one of the fostered animals, I agree to either bring the animal into the shelter for a meeting with the potential adopting family or arrange for the family to come directly to the foster home.

If I am fostering this animal to determine compatibility in my home or with my pets, I will return to FHS within one week to either return this animal or complete the adoption process.

I understand that FHS does not adopt cats to individuals who intend to declaw them.

I understand the terms of this contract and agree that it is in the best interest of the animal(s). I will abide by all of the conditions stipulated, as indicated by my above initials.

I hereby agree to indemnify and hold harmless Foothills Humane Society, its employees, and its agents from any and all liability arising out of or in consequence of injury sustained as a result of any activity connected with fostering animals for Foothills Humane Society.

Signature _____ Printed name _____

Date _____

Address where animal(s) will be kept: _____

Phone Numbers: Days _____ Evenings _____

Cell _____ E-mail address _____

Person responsible for daily care _____

Where animal(s) will be kept in the home _____

Signature of FHS Representative _____ Date: _____

Animal name: _____ FHS ID # _____

Next vaccines are due on: _____

Next Flea prevention/Heartworm prevention is due on: _____