

CCHS Foster Care Agreement

The parties hereto agree as follows: The Foster Caretaker (the caretaker or you) signing below hereby acknowledges receipt from the Clay County Humane Society Animal Shelter and Rescue (CCHS), of the animal(s) described below for the foster care; and in accepting this (these) animal(s) and in consideration for being entrusted with the care, custody, and possession of the animal (s), agrees to be bound by the covenants and conditions stated below.

Foster Care Personal Information:

Name: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ Evening Phone: _____ Cell Phone: _____

Animal(s) Received

Name	Breed/Sex/Age	Meds/Vaccinations Received

The parties agree that:

- The Foster Care.** The Caretaker shall provide the animal(s) with good care in their home, including, but not limited to, food, water, shelter, outdoor exercise, socializing and playing, transportation to vet or adoption event, grooming, training, bottle feeding and medication when required. You are providing the Foster Care out of your love for animals, and as a volunteer, at no charge to CCHS.
- Ownership.** As between the Caretaker and the Clay County Humane Society, Inc, the animal(s) shall remain the sole property of the Clay County Humane Society, Inc.
- Returning Fostering Animal(s).** The animal(s) shall be returned to the CCHS upon request by either organization, or if you are no longer able to adequately care for the animal(s). Or if you are relocating outside of the Clay County area.
- Inspection.** Agents of CCHS will be allowed to inspect the premises in which the animal(s) will be maintained or are maintained from time to time for the purpose of determining the suitability of those premises for the care and maintenance of the animal(s).
- Placement of Animal(s).** The Foster Caretaker understands and acknowledges that he/she does not have any right or authority to keep the foster animal(s) or place the foster animal(s) in other premises with other individuals unless permission is given in writing by the CCHS shelter manager.
- Costs and Expense.** CCHS will provide the initial vaccinations and medication for minor existing ailments and will provide dog/cat food and litter to the Foster Caretaker for the use of the fostered animal(s). We will pay all veterinary treatment costs that may be incurred for the animal(s) during Foster Care, provided that we have given you prior approval for such treatment except in the event of a medical emergency, in

which case you use your best judgment in the matter. You will give us the medical receipts from the veterinarian for the veterinary care and medicines. Whenever possible, you will use Dr. Shew (812) 877-1061 as the veterinarian. The Foster caretaker agrees that should the animal require extensive medical treatment the Clay county Humane Society may request immediate return of the animal(s).

7. **Adoption by Caretaker.** In the event that you wish to adopt any or all of the animal(s) as a household pet for yourself you must first enter in to our Adoption Application Agreement.
8. **No Liability.** The Foster Caretaker is not liable to CCHS for any injuries to, illness or, disappearance of the animal(s) arising from Foster Care, except if such injuries, illness or disappearance are caused by or occur out of gross negligence or intentional misconduct. The CCHS are not liable for any bodily injury or property damage, losses or injury whatsoever to you or other persons, or to you or another person's animals and pets caused by the actions, behavior or the health of the animal(s), or arising out of the Foster Care, except if such damages, losses or injuries are caused by our gross negligence or intentional misconduct.
9. **Returning Animal(s).** The Foster Caretaker agrees to return said animal to the Clay County Humane Shelter no later than _____ subject to change if authorized by CCHS personnel.

This Contract represents the entire agreement between the parties and any modifications will be made in writing and signed by both the Foster Caretaker and the shelter manager or the Foster Care Coordinator.

Foster Caretaker

Executed _____ 20

Signed _____

Clay County Humane Society, INC.

Executed _____ 20

Signed _____

CCHS Representative

FOR OFFICE USE ONLY

Applicant Information

At Least 18 years of Age? YES/No Own Home? YES/No Rent? YES/No

Anyone in family Allergic to animals? YES/NO Ages of Children In Home? _____

What other animals are in your home? _____

Would you like to foster a dog or cat? _____

COMMENTS: _____

