



# Foster Care Application And Agreement

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Are you over 18 years old? Yes No

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Do you own or rent: \_\_\_\_\_ Landlords name and number: \_\_\_\_\_

Number of children in the house: \_\_\_\_\_ Ages of any children: \_\_\_\_\_

Do you have a yard: Yes No Is the yard fenced in: Yes No

Which best describes your typical day: Home all day Out part time gone 7+ hours

List ANY pets currently living in your home

---

---

---

Name of your veterinarian: \_\_\_\_\_ Phone: \_\_\_\_\_

Are your pets spayed/neutered: Yes No Explain: \_\_\_\_\_

What type of animal are you interested in fostering:

- Young unweaned kittens without a mom
- Young unweaned kittens with a mom
- Weaned kittens
- Adult cats
- Young unweaned puppies without a mom
- Young unweaned puppies with a mom
- Weaned puppies
- Adult dogs
- Pocket pets (ferrets, hamsters, gerbils, etc)
- Rabbits
- Sick or injured pets
- Birds or exotic pets

Are you willing to foster more than one animal at a time: Yes No

Where will your foster pet be kept: \_\_\_\_\_

Do you have experience caring for young, unweaned puppies or kittens: Yes No

Have you ever given medication to sick animals before: Yes No

Are you willing to provide food and litter at your own cost for foster pets: Yes No

Have you ever fostered before: Yes No

If yes, what organization was this for \_\_\_\_\_

I, \_\_\_\_\_ make the above statements and voluntarily enter into this agreement to provide a temporary home as a foster caregiver to any animal the Humane Society of Seneca may temporarily place in my care.

- I understand that I may be required to provide foster care to my foster animal for an extended and indefinite period of time.
- I agree that I am over 18 years of age.
- I understand the Humane Society of Seneca County provides no guarantee as to the health of my foster animal and that my foster animal may have medical needs, socialization problems, and may not be house broken.
- I will take all necessary precautions to prevent my foster animal from either impregnating another animal or becoming impregnated. In the event this happens, I will notify the Humane Society of Seneca County immediately.
- I understand that I may only have my animal temporarily.
- I agree to bring my foster animal in for all required medical appointments. I agree not to arrange any veterinary care for my foster pet without the express consent of the shelter technician. I understand I am responsible for any costs incurred from veterinary services received without prior authorization.
- I agree that I am fostering this animal and that I do not have any right of ownership over my foster animal. I further agree that the Humane Society of Seneca County's rights in and to my foster animal are superior to mine.
- I agree to immediately return any foster animal in my care to the Humane Society of Seneca County at any time for any reason. I understand the Humane Agent may come to retrieve said animals. If the Humane Society of Seneca County is forced to undertake legal action to enforce this provision of the agreement, I agree to indemnify the Humane Society of Seneca County for all court costs and attorneys fees connected with such action.
- I agree that if I plan to move at any time during the period I am fostering an animal, I agree to contact the Humane Society of Seneca County and provide them with my new contact information. I understand further they may request return of my foster animal based on my change of residence, and agree that I will surrender my foster animal immediately upon request.
- I understand that as long as I provide foster care to my foster animal to the Humane Society of Seneca County's satisfaction, I will be given the first right of adoption of my foster animal, at such time as the Humane Society of Seneca decides to place my animal for adoption.

- If at any point I can no longer, or do not want to continue to, provide care and shelter for my foster animal, I agree to contact the Humane Society of Seneca County and arrange for surrender and return of my foster animal.
- I will not transfer possession or custody of my foster animal to any other person at any time.
- I agree to contact the Humane Society of Seneca County with any and all questions or concerns about my foster animal.
- I agree that if I refuse or fail to comply with any provision of this agreement, the Humane Society of Seneca County has the right to terminate this agreement and also has the right to the immediate surrender and return of my foster animals. I further consent to provide the Humane Society of Seneca County access to my premises if necessary to facilitate the return.
- I agree that the opportunity given to me to help rehabilitate my foster animal, as well as the chance of a potential future adoption, is of significant benefit to me, and serves as proper legal consideration in exchange for my agreement to the terms of this contract.

I have read this application and agreement in its entirety, and I agree that all statements and agreements contained in this document are made by me and are truthful, under penalty of perjury under the laws of the State of Ohio.

As a foster family, I agree to release the Humane Society of Seneca County and its representatives of any liability arising from our duties as a foster family from this date forward.

This foster contract is entered into this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, between

The Humane Society of Seneca County of Tiffin, OH and

Fosters full name \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate: \_\_\_\_\_

Signature: \_\_\_\_\_

Shelter Representative Signature: \_\_\_\_\_