



ARF FOSTER CARE PROGRAM AGREEMENT

I agree to the following conditions as a Foster Parent for ARF.

1. I certify that my own pets are currently up to date on their vaccinations and are healthy.
2. I agree to keep my pets separated from the foster animal(s) until they can be properly introduced. (If you need help with this process, let us know prior to taking in your foster)
3. I agree to keep the foster animal(s) indoors unless accompanied by myself or someone in my family. If fostering a dog, the fenced in yard area must be secure.
4. Should the foster animal(s) become ill in my care, I agree to contact ARF immediately.
5. ARF will provide deworming, vaccinations and any other medical care deemed necessary by ARF during the foster time.
6. If I agree to take on a foster that is ill and requires special care or medication, I will follow the instructions provided and administer medications in a timely and effective manner.
7. I fully understand that the foster animal(s) are the property of ARF unless otherwise indicated and I may not, under any circumstances, sell, adopt, or give these animals away.
8. I agree to follow any decision made by ARF regarding the return and/or disposition of the foster animal(s).
9. I agree to return the foster animal(s) as instructed to ARF.
10. I understand that ARF is not responsible for any property damage and/or injuries that may occur.
11. I understand that if I decide to adopt one of my foster animals I will be required to follow all regular adoption procedures in place with ARF.

Foster animal name _____ Cat _____ Dog _____

Signature of Foster Parent

Date

Foster Parent Name _____

Address _____

Telephone# _____

E-Mail _____

ARF Representative _____