



Blount County Humane Society

Foster Angel Agreements

This foster care agreement is entered into between the **Blount County Humane Society (BCHS)** a non-profit organization, and the caretaker, _____.

In consideration of the mutual promises in this agreement, and other good and valuable consideration, the **BCHS** and caretaker agree to the following terms and conditions, intending to be legally bound.

1. Foster Care: You will provide foster care in your home at the address listed on this agreement. Your foster care will be comprised of the following, as applicable to the type of pet you are fostering:*

- Provide daily wholesome food and water
- Provide clean, grassy area for elimination
- Provide outdoor exercise
- Provide warm, safe place inside your home
- Provide litter box and clean litter
- Administer necessary medication & monthly application of heartworm & flea & tick control
- Provide transport to veterinarian appointments
- Provide socialization and play time

Initial: _____

2. Veterinary Care: Fosters should use Village Veterinary Clinic or PPAW Veterinary Clinic for all foster pets. Procedure for any care will be as follows:

- Call your assigned **Team Leader**.
- Communicate the nature of the veterinarian visit needed
- Foster Care Coordinator will make arrangements at the proper clinic, you will be notified by your Team Leader.
- You will transport foster to appointment or make arrangements for transport
- All veterinary expenses will be paid by **BCHS** if prior authorization is obtained
- All vet receipts will be given to your **Team Leader** within one week of veterinary appointment.

Initial: _____

3. Veterinary Records: You will maintain a copy of your foster pet's veterinary records and provide a copy for the **BCHS adoption** file.

Initial: _____

4. Expenses: You are responsible for providing the following unless other arrangements have been made:

- Dog / cat food or formula (for puppies / kittens)
- Dog bed
- Food and water bowls
- Towels and blankets
- Crates
- Toys

Initial: _____

5. Adoption Events: You will attend at least two adoption events a month or make arrangements with your **Team Leader**. You will attend special adoptions events or make arrangements with your **Team Leader** or another volunteer.

Initial: _____

6. No Liability: You are not liable to **BCHS** for any injuries to, illness, or disappearance of the foster pets arising out of normal foster care, except if such injuries or disappearance are caused by or arise out of your gross negligence or intentional misconduct. **BCHS** is not liable to you for any bodily injury, property damage, or loss whatsoever to you, other persons, your pets, or other person's pets, caused by the actions, behavior or health of the foster animals in your care, except if such injury, damage, or loss are caused by gross negligence or intentional misconduct by **BCHS**.

Initial: _____

7. Adoption Activities: You understand and acknowledge that any and all foster animals in your care will remain at your residence unless attending adoption events or veterinary appointments that are organized by your team leader or another appropriate **BCHS** representative. You understand that **BCHS** retains ownership and control of any foster animals in foster homes. Any and all meet and greets, home visits, overnight visits, or other activities involving the foster animal must be pre-approved, organized and authorized by, and carried out by an appropriate **BCHS** representative. Foster parents are not authorized to accept applications, carry out meet and greets or other adoption related appointments or promise an adoption to any individual. These are to be handled by trained **BCHS** representatives only. *Experienced fosters are occasionally promoted to additional responsibilities as appropriate, please inquire about training if you are interested.

Initial: _____

8. Nurturing Foster Animals: You promise to make your best effort to nurture any and all animals in your care during fostering. You understand that animals aren't perfect, and each comes with their own personality, level of training and individual background and history. You understand that oftentimes **BCHS** has limited knowledge of temperament and history of rescued animals. By initialing below you understand that **BCHS** makes every effort to provide you with support, knowledge of animal care and training and trouble-shooting during fostering, with hopes of creating a workable and successful foster environment. Should any situation arise in which a foster home becomes unable or unwilling to continue providing foster care, foster agrees to provide **BCHS** with adequate and reasonable time to make suitable arrangements to find a new foster home for the animal.

Initial: _____

7. Returning Fosters: You agree to contact your **Team Leader** in the event you are no longer able or willing to provide foster care for your foster pet. You will continue to provide care for a reasonable period of time until **BCHS** is able to make arrangements for a new foster.

Initial: _____

*Any modification of this agreement must be in writing, signed by both you and **BCHS**

Foster

Signature

Print Name

Street Address

City, State, Zip

Home Phone

Cell Phone

Blount County Humane Society

BCHS Representative Signature

Print Name

Assigned Team Leader

Team Leader Cell Phone

Team Leader Email Address