

Foster Contract and Application

Thank you for your interest in providing a foster home for a Pack Life Canine Rescue Dog! Your willingness to open your home and dedicate your time to help save a dog under our care is greatly appreciated. We hope that the experience is a rewarding one to you as you help him or her along the path to finding a forever home.

Fostering is a great opportunity that carries with it certain responsibilities. As such, please take a moment to read and understand the following conditions that must be met for our dogs to be placed in foster homes. All adult members of the household must understand and agree to this contract as indicated by their signatures. For in and consideration of the privilege of fostering a PACK LIFE foster dog, I (We) agree as follows:

- 1. I agree that I am over 18 years of age.
- 2. I agree to provide the authorized PACK LIFE CANINE RESCUE (hereafter PACK LIFE) representative or designee access to all parts of my home and property for a home inspection before my application to foster is approved
- 3. I agree to provide my foster dog with proper and routine veterinary care, arranged by PACK LIFE, including a yearly wellness exam and urgent/emergency care as needed and current, required or recommended vaccinations.
- 4. I will not arrange or cause any elective veterinary procedure to be performed on my foster dog without the express written consent of the PACK LIFE representative or designee.
- 5. I understand that PACK LIFE will reimburse me for any veterinary care, vaccinations, surgery or prescriptions which PACK LIFE has approved in advance of treatment or expressly approved after treatment is administered, with such approval at the sole discretion of PACK LIFE. PACK LIFE will not be liable for any unapproved expenses; I agree to be responsible for any unapproved expenses.
- 6. I agree that I will keep my foster dog current on regular heartworm and flea/tick preventative medications as instructed by PACK LIFE, in addition to any other medications prescribed by his/her veterinarian. All medical issues related to the foster dog will be communicated immediately to the PACK LIFE representative or designee.
- 7. I acknowledge and agree that PACK LIFE provides no guarantee as to the health of my foster dog, and that my foster dog may have medical needs, socialization problems or may not be housetrained.

- 8. I acknowledge and agree that my foster dog may have come from an uncertain background where it may have been exposed to stress, neglect or abuse and that my foster dog may possess idiosyncrasies or problems that have not yet been discovered by PACK LIFE evaluations. I agree that the care provided by me includes the ongoing evaluation and management of my foster dog's temperament in cooperation with and under the supervision of PACK LIFE. I agree to assume responsibility, hold harmless and indemnify PACK LIFE for any and all events that occur in connection with the fostering of a PACK LIFE animal.
- 9. I acknowledge and agree that I am financially responsible for all proper and routine care of my foster dog, including providing an adequate supply of high quality, suitable food, shelter, toys, treats, etc. unless other arrangements are made by the PACK LIFE representative or designee.
- 10. I agree that no PACK LIFE dog will be left outside at night, tied out unattended for any length of time or placed in a situation where harm could come to him/her. I further agree to give my foster dog proper exercise to maintain his/her health.
- 11. If a PACK LIFE dog is lost or stolen, I agree to immediately contact the PACK LIFE representative or designee.
- 12. I consent and agree that the foster dog may be with me on a temporary basis, that I do not have any rights of ownership for the foster dog and that PACK LIFE's rights regarding the foster dog are superior to my privilege as foster care provider.
- 13. I agree, with prior notice, to transport my foster dog to and from any PACK LIFE adoption events that he/she is reasonably able to attend, or help in the facilitation of adoption of my foster dog through meet-and-greets, etc. The PACK LIFE representative or designee will have sole discretion in any decisions made regarding placement or adoption of my foster dog.
- 14. I consent and agree to provide the PACK LIFE representative or designee access to my home and property with prior notice, for the purpose of checking on my foster dog at any time that I am in possession of the dog.
- 15. If I move at any time while I have my foster dog, I agree to contact the PACK LIFE representative or designee prior to the move with new contact information.
- 16. I agree that I may not sell, give away or otherwise transfer possession of my foster dog to another person, transfer to another rescue, surrender to a shelter or abandon my foster dog. If for any reason I am unwilling or unable to continue to foster my dog, I will immediately contact the PACK LIFE representative or designee to retrieve the dog. No other disposition of my foster dog is permissible.
- 17. I agree that I must immediately return any animal in my care to the PACK LIFE representative or designee upon request at any time.
- 18. I agree that if I do not comply with any provision of this agreement, PACK LIFE has the right to terminate the agreement and immediately take possession of the foster dog. I further consent and authorize PACK LIFE to access to my premises as necessary to facilitate the return. If PACK LIFE is forced to undertake any action to enforce any provision of this agreement, I agree to hold harmless and indemnify PACK LIFE for any court costs and attorneys' fees associated with such action.

- 19. I understand that so long as I have provided foster care to my foster dog to PACK LIFE's satisfaction, I will be given first right of adoption of my foster dog at such time that PACK LIFE decides to offer my foster dog for adoption.
- 20. I understand that PACK LIFE depends on its volunteers and fosters to provide to fulfill its mission of giving each dog a place to be safe, happy and loved. By signing this contract, I agree to hold harmless and indemnify PACK LIFE or any of its directors, officers, agents, volunteers, successors and heirs liable for any monetary, general, special, physical, emotional or property damages that may arise from my involvement with PACK LIFE.
- 21. I acknowledge and agree that until my foster application is approved in writing by a duly authorized PACK LIFE representative that no foster privileges will inure to me.

By signing below, I (We) and all adult members of my (our) household acknowledge and agree that we have read and understand this agreement and further acknowledge and agree this is a legally binding agreement that I (We) will adhere to all of the PACK LIFE CANINE RESCUE conditions outlined above.

Date
Date
Date
Date
Date
Date

PACK LIFE CANINE RESCUE REPRESENTATIVE



See One, Save One

Foster Application

I. Foster Home Information

Contact Information	
Name:	
Street Address:	
City:	State: Zip:
Phone:	(Primary)
Phone:	(Alternate)
Phone:	(Alternate)
Email:	
<u>Personal Information</u>	
Your contact and personal informat related to your application to foster	ion will not be shared except when nece a dog.
Driver's License Number:	State:
Employer Information	
Business Name:	
Street Address:	
City:	State: Zip:
Phone:	
Property Information	
I own my home and am perm	itted to bring a dog into my dwelling.
I rent my home and am permi	itted to bring a dog into my dwelling.

Landlord's Name:	
Street Address:	
City:	State: Zip:
Phone:	
Property Information, continued	
Length of time at this residence:	
I have a fenced-in yard	
Height of fence: Fence is m	ade of:
The fence has a gate:	
The gate has a lock:Describe th	ne lock:
Other Animals	
I have companion animals at r	my home currently.
	n for each animal currently in your care at your our care for the last 2 years but who are no this form if more room is needed):
Name:	Age:
Species: Breed:	
Currently under my care at my ho	ome
Lived under my care in my home What happened to him/her?	in the past 2 years, but is no longer with me.
Spayed/Neutered: Has been b	ored/currently breeding:
Where he/she sleeps at night	
Where he/she stays during the day when	n I'm at home
Where he/she stays during the day when	n I'm NOT home
Current on vaccinations?	

Veterinarian Information

(If less than 5 years with this veterinarian, please provide contact information for your previous vet as well.)

Name:			
Street Address:			
City:	Stat	te: Zip:	
Phone:			
Persons Living in Foster Home			
Name:	Age:	Relationship:	_
Name:	Age:	Relationship:	
Name:	Age:	Relationship:	_
References			
(Please provide the names/informatic know you and your companion anima		•	ho
Name:	Relations	ship: Phone:	
Name:	Relations	ship: Phone:	
I have read this Application and the statements in this document are tru		act carefully and attest that all	
Signature:		Nate:	

II.	Foster Dog Information	
	Name:	-
	Microchip/ID:	
	Gender:	
Comn	nents:	