



ANIMAL RESCUE FRIENDS SOCIETY of GRANT COUNTY

P.O. BOX 453, EPHRATA, WA 98823
501(c)(3) Non-Profit Organization

FOSTER CARE AGREEMENT AND WAIVER

Animal Rescue Friends Society of Grant County, hereafter known as "ARFSGC," operates the Foster Care Program for animals that are not immediately adopted. This agreement is entered into with ARFSGC jointly by the undersigned _____ (print your name) hereafter known as "Foster."

I understand fully that any animals which may be placed with me are only temporarily in my care and belong exclusively to ARFSGC. I further understand that the purpose of this foster relationship is solely to provide care for the animals giving them opportunity for further socialization, training, and greater adoptability.

I understand that when an animal is ready to be available for adoption, or when requested, I will surrender it to ARFSGC for placement. Placements are subject to the guidelines of ARFSGC adoptions. The Foster family may be offered the option of adopting foster pets upon/prior to first adoption inquiry. If the Foster family declines at the time of inquiry by another party, then no subsequent application from the Foster family will be accepted unless the inquirer declines.

I agree to adhere to the following guidelines:

- I will contact ARFSGC when I have questions.
- I agree to provide care, food, water, shelter, and medication(s) as instructed by ARFSGC.
- I will treat foster animals in a kind, ethical manner, and address behavioral issues and problem solving concerns with ARFSGC.
- I agree to keep foster puppies away from other dog-traffic areas until they are fully vaccinated.
- I agree to keep any foster animal under my control at all times while I am fostering, including keeping dogs on a leash while in public. Should a foster dog in my/our care escape and be impounded by Animal Control, ARFSGC will pay the fee for the first impound event. Should the foster dog escape my/our care again and be re-impounded I/we agree to pay subsequent impound fees to release the dog immediately.
- The foster animal will be in my/our custody ONLY. I must contact ARFSGC to receive authorization for temporary placement in another foster home.
- I understand returning animals prior to their pre-arranged return date may cause an undue burden on the Foster Care Department. I will do my best to avoid this. In the event that I cannot continue to foster the animal(s) currently in my care I agree to give ARFSGC at least **forty-eight (48) hours** notice prior to returning an animal.
- I agree to transport or make reasonable accommodations to provide dogs for viewing to potential adopters or to authorized veterinarian for vaccinations, medical treatments, and/or spay/neuter surgery on the scheduled dates per the animal's chart.
- I assume all responsibility for any property damage or injury to any person, animal, or possessions caused by the foster dog(s) while in my care.
- I understand ARFSGC will take every precaution to ensure that any animal I foster is reasonably healthy and that any known health problems will be discussed with me. If I observe any changes in health or behavior, or the animal dies, I will contact ARFSGC immediately.

INITIAL AND DATE

- I understand the risk of these known or unknown health problems being transmitted to my own pets/family, and ARFSGC is not responsible for any necessary medical treatment for my own pets or family as a result of transmission of parasites, disease or infection.
- I understand any and all medical treatment for foster animals must be pre-authorized and arranged by ARFSGC and ARFSGC is not responsible for any unauthorized medical treatment and/or cost incurred by the Foster for the care of ARFSGC animals.
- I agree to notify ARFSGC immediately if the foster animal's medical condition changes in any way or if the animal is showing warning signs of severe illness.
- I agree that if any health problem is deemed by a veterinarian and ARFSGC to be untreatable, if the treatment is cost-prohibitive as determined by ARFSGC, or a dog proves itself to be dangerous to the community, I will return the animal to ARFSGC as soon as possible.
- I will make an effort to provide information about the dog that will help with proper adoptive placement.

I hereby agree to follow the terms of the Foster Care Agreement and Waiver, and to indemnify and hold harmless ARFSGC from any and all liability arising out of or in consequence of, or injury sustained as a result of, any activity connected with volunteering for ARFSGC as a Foster Home.

Volunteer printed name

Volunteer signature

Date

ARFSGC staff signature

Date