



General Foster Care Contract

I, _____ willingly volunteer to care for specific SpokAnimal animals as described in any and all Foster Care Arrangements.

I understand that other animals in my household could be exposed to medical or behavioral conditions that have not been recognized in the foster animals placed with me by SpokAnimal, and that SpokAnimal is not liable for any disease or injury of my own companion animals or other exposed animals.

I understand that I can return foster animals to SpokAnimal at any time if circumstances develop whereby I am unable to give the best possible care.

I understand that I will be held responsible for the daily care and feeding of foster animals. Should a foster animal become ill, I will contact SpokAnimal immediately for further instructions. I understand that all veterinary care will be provided at SpokAnimal. In case of a life threatening emergency I will transport the animal to SpokAnimal. If injury or illness requires further extensive veterinary care, I understand that a decision will be made by SpokAnimal.

I understand fully that foster animals are temporarily in my care and that they belong exclusively to SpokAnimal. Any determination about the disposition of foster animals will be made solely by SpokAnimal.

I understand that when foster animals are ready to be placed with a permanent guardian that I must return the animal to SpokAnimal upon request. I understand that any and all placements will be made through SpokAnimal and are subject to SpokAnimal guidelines.

I acknowledge that SpokAnimal reserves the right to remove any foster animals from my care at any time for any reason whatsoever.

I give SpokAnimal permission to inspect my home or property at any time to determine the condition of the foster animals or the environment in which they are housed.

Signature _____ Date _____

Name _____ Home Phone _____

Address _____ Work Phone _____

_____ Cell Phone _____

E-mail _____

Section 1.

How long have you lived at your current address? _____

If renting, do you have your landlord's permission to foster? Yes_____ No_____

How many adults in the home? _____ Children? _____ Ages of Children? _____

Who will be responsible for the foster animal's care? _____

Please supply three references to contact. If possible, please make one a vet, trainer, or animal related.

- 1. _____ Phone_____
- 2. _____ Phone_____
- 3. _____ Phone_____

Section 2:

Current Pets: Please include cats and dogs only.

Breed	Age	Sex (Spayed/Neutered?)				License #	Exp Date
_____	_____	M	F	Yes	No	_____	_____
_____	_____	M	F	Yes	No	_____	_____
_____	_____	M	F	Yes	No	_____	_____
_____	_____	M	F	Yes	No	_____	_____
_____	_____	M	F	Yes	No	_____	_____
_____	_____	M	F	Yes	No	_____	_____

(We verify vaccinations for the safety of your pets.)

Are your pets current on vaccinations? Yes _____ No _____

Please provide the name and number of your veterinary clinic.

Section 3:

Please circle the animals that you have experience with and/or are interested in fostering.

Cats/kittens with upper respiratory infections Dogs/puppies kennel cough

Moms with un-weaned kittens/puppies Un-weaned kittens/puppies

Healthy puppies/kittens that need to gain weight to be spayed or neutered

Please answer the questions below.

Can you administer medication in pill or liquid form? Yes _____ No _____

Length of time during the day animals would be left alone? _____

Where will the animals be kept during the day? _____

Where will the animals be kept at night? _____

Where will the animals be kept when you are out of town? _____

Do you have space or a crate to isolate animals? Yes _____ No _____

Please answer the questions below for DOGS only.

Do you understand that dogs will bark if left alone? Yes _____ No _____

Do you understand that dogs will chew on things if they are left alone? Yes _____ No _____

Have you attended any dog training classes? Yes _____ No _____

Do you have a fenced yard? Yes _____ No _____

Please answer the questions below for CATS only.

Do you understand that foster cats CAN NOT go outside? Yes _____ No _____

Do you understand that cats scratch doors or furniture to mark territory? Yes _____ No _____

Do you understand that some cats may take longer to adjust to other cats? Yes _____ No _____

For Office Use Only

Facilities Check: Adequate? Yes _____ No _____

Approved: PetPoint Person Number _____

Declined: Why _____