



Senior Dog Haven & Hospice

Where grey muzzles are nuzzled.

FOSTER CONTRACT

Please read and review carefully before signing.

All fosters must be at least 18 years of age.

Date _____

Dog's Name _____

ID # _____

Age _____

Breed _____

Color _____

Weight _____

Sex _____

Foster's Name _____

Date of Birth _____

Driver's License # _____

Spouse/Partner _____

Date of Birth _____

Driver's License # _____

Address _____

City _____ State _____ Zip _____

Phone: home _____

cell _____

alt cell _____

work _____

Email address _____

Alternate email address _____

Preferred method of contact _____

Please read the following carefully and initial.

Note that Senior Dog Haven & Hospice shall hereafter be referred to as SDH&H.

_____ I/We agree that this dog will be fostered in my home and will not be sold, rehomed, gifted or given to a third party for any reason.

_____ I/We agree to treat this dog in a humane manner. I/we will provide adequate food, water, shelter, attention and interaction.

_____ I/We agree that the dog will live inside the house as a member of the family.

_____ I/We agree to allow a reasonable amount of time for the dog to become acclimated to his new environment.

_____ I/We agree to never leave the dog tethered outside.

_____ I/We agree to not leave the dog confined/crated for extended periods of time.

_____ I/We understand that SDH&H makes no guarantees as to the temperament of this dog and SDH&H is not responsible for any future damages or injuries caused by the dog.

_____ I/We understand that SDH&H makes no guarantees as to the health of this dog.

_____ I/We agree to provide routine medical care, including daily medications and supplements, if necessary.

_____ I/We agree to notify SDH&H within 30 days of a change in address, phone number or email.

_____ I/We agree to keep a collar and his/her SDH&H ID tag on the dog at all times.

_____ I/We agree to never walk the dog off leash, unless in a fenced-in dog walk.

_____ I/We agree to notify SDH&H immediately if the dog were to become lost .

_____ I/We agree to never submit the dog to elective or cosmetic surgeries or procedures.

_____ I/We agree to be contacted by a representative of SDH&H in order to provide updates or progress reports on how the dog is adjusting.

_____ I/We agree that if for any reason I/we find myself/ourselves unable to care for the dog, I am to notify SDH&H and make arrangements to return him/her. I further agree to allow SDH&H a reasonable amount of time to secure a new foster home for the dog.

_____ I/We avow that all family members agree to the fostering of the dog and will abide by the terms of this agreement.

_____ I/We agree to immediately relinquish the dog to a representative of SDH&H should I/we violate any of the preceding conditions.

Release

The Foster, and his/her spouse, heirs, executors, personal representatives and assigns, agree never to bring a claim or suit against Senior Dog Haven & Hospice, Inc. The Foster releases Senior Dog Haven & Hospice, Inc. and its founders, officers, directors, board, agents, volunteers and representatives from all liability arising from the fostering or behavior or actions of the dog.

The Foster understands that this agreement discharges Senior Dog Haven & Hospice and its founders, officers, directors, board, agents, volunteers and representatives from any liability to the Foster and his/her spouse, heirs, executors, personal representatives and assigns, with respect to bodily injury, personal injury, illness, amputation, scarring, death, property damage or other loss that may result from the adoption or behavior or activities of the dog.

The Foster has read this Release Agreement and fully understands that he/she will relinquish all claims or actions whether now known or discovered in the future against Senior Dog Haven & Hospice and its founders, officers, directors, board, agents, volunteers and representatives. Foster is of legal age and legally competent to sign this agreement. Foster is signing this agreement of his/her own free will.

Indemnity Agreement

The Foster, and for his/her spouse, heirs, executors, personal representatives and assigns, agrees to indemnify and hold Senior Dog Haven & Hospice and its founders, officers, directors, board, agents, volunteers and representatives harmless for all bodily injury, personal injury, illness, amputation, scarring, death, property damage or other loss, including attorney's fees and costs of litigation, that result to anyone else or any other entity because of Foster's negligence or liability. This includes lone acts or omissions by the Foster as well as the combined acts of the Foster with others.

The Foster expressly agrees that the releases and indemnity agreement are intended to be as broad and inclusive as permitted by law. The Foster agrees that in the event that any clause or provision of this agreement shall be held to be invalid by any court of jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this agreement. This is the entire agreement between parties and supersedes and other verbal or written statements, representations or promises.

I certify that I have read and understand the terms of the Foster Contract, Release and Indemnity Agreement by signing below on this _____ day of _____, 20__.

Foster's Signature

Co-Foster's Signature

Foster's Printed Name

Co-Foster's Printed Name

Senior Dog Haven & Hospice Representative Signature

Senior Dog Haven & Hospice Representative Printed Name