

## **SAVE Foster Contract**

### **Animal Information:**

Animal Name \_\_\_\_\_ Cat/Kitten/Dog/Puppy

Age: \_\_\_\_\_ Sex: F/SF/M/NM Breed: \_\_\_\_\_

Description: \_\_\_\_\_

Foster contract dates: \_\_\_/\_\_\_/\_\_\_ through \_\_\_/\_\_\_/\_\_\_

### **Foster Family Information:**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

I hereby agree to provide foster care to the animal described above. I further agree that the animal belongs to SAVE. By signing this contract, I certify that I have read it and understand it completely, and I agree to the following conditions:

1. I will provide the animal with a good home and give it proper care and kind treatment for a maximum of four weeks from today, by which time I must either return the animal to SAVE or permanently adopt the animal.
2. The animal will not be sold or given to others, or sold for experimentation.
3. I will not hold SAVE or any of its employees responsible for any defects the animal may now or later possess.
4. I understand that SAVE is responsible to make medical care decisions for this animal and SAVE is responsible for the cost of medical treatment. I agree make every reasonable effort to contact SAVE before taking the animal for care, to take the animal to a Veterinarian of SAVE's choice, and accept the decision of SAVE staff with respect to the course of treatment for the animal. I will not spay/neuter this animal. This is SAVE's responsibility. I will not declaw under any circumstances.
5. I will not hold SAVE responsible for any damage or injury to persons or property that may be caused by the animal after I take custody and possession of it.
6. I will allow SAVE's agents to examine the animal at anytime; my right to possession is subject to and conditioned on my carrying out the terms of this agreement and I recognize that SAVE may take possession of the animal if it determines that I have failed to comply with any of the terms of this agreement.
7. I agree to return the animal on the following day(s) for required vaccines/Treatments/Spay or Neuter:

Scheduled return date: \_\_\_\_\_ reason: \_\_\_\_\_

Signature of adopter: \_\_\_\_\_

Approved by Save Staff: \_\_\_\_\_