

## Foster Agreement

1. I understand that I am the primary caretaker. I will provide adequate food, water, social interaction, potty breaks, litter cleaning, and essential daily needs.
2. I agree that I will not relinquish custody of the foster pet to anyone except HSWM, **even temporarily**.
3. I understand that my foster pet may cry, whine, fearful, shy, sick, depressed, have had past trauma or abuse, not know commands, may chew or scratch my belongings, and needs my love and compassion.
4. I understand foster pets are only temporarily in my care and remain the property of HSWM and are subject to relinquishment at any time. Failure to return a Foster Pet will result in termination as a foster and a “do not adopt” status and/or legal action.
5. I agree to follow HSWM Emergency Contact Protocol immediately, when a foster pet is experiencing a medical/health emergency. I understand that my foster pet may need to be brought to HSWM for medical evaluation as soon as possible. I understand a decision will then be made by HSWM if the animal must stay at the shelter or return to the foster home.
6. I understand private veterinary costs incurred by the foster parent **WILL NOT** be reimbursed by HSWM.
7. I understand that HSWM **WILL NOT** reimburse me for any expenses related to food, toys, litter, medication, and daily care items associated with my foster pet.
8. If my foster pet escapes my home or becomes lost, I will **immediately** notify the HSWM Foster Coordinator.
9. I will not take my foster pet to a groomer
10. I will not take my foster dog to a dog park/beach without prior permission from the HSWM Foster Coordinator.
11. I agree to keep my foster dog on a 6ft. non-retractable leash when outside.
12. I agree that I will not allow my foster cat outdoors.
13. I will not give my foster cat or kitten a bath before speaking to the HSWM Foster Coordinator.
14. I will notify the HSWM Foster Coordinator immediately if my foster pet exhibits aggressive behavior.
15. I understand that my foster animal’s health is not guaranteed and may break with illness while in my care.
16. I understand my personal companion animals could be exposed to illness and I understand that it is highly recommended to quarantine my foster animal for at least 10 days to prevent exposure to my household.
17. I understand that **I am not allowed to administer ANY** medication to my foster animal without permission from the HSWM Foster Veterinary Technician or HSWM Veterinarian.
18. I understand that it may be necessary for HSWM Medical Team to make a decision of euthanasia based on severe illness or behavior.
19. I understand HSWM is not responsible for damage to personal property and I waive my rights to make any claim of liability for any injury or damages.
20. I agree to return my foster kit containing supplies provided by HSWM. If I fail to return my supply kit, I may be charged a fee of \$10. I understand when I return my supply kit, this allows another shelter pet the opportunity for foster care.
21. I understand that I must communicate with the HSWM Foster Coordinator and Foster Veterinary Technician in a timely manner and keep my contact information up to date.
22. I agree to help build my foster’s adoption profile by taking frequent pictures and sending them to the HSWM Foster Coordinator.
23. I understand that if I want to adopt my foster animal, I need to let the Foster Coordinator know ASAP, or before they have surgery.

**Signing this contract, you acknowledge that you have read and agree to all terms listed above.**

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*(print)*

Signature: \_\_\_\_\_

**The following concerns have been disclosed:**

<b>Concern(s)</b>	<b>HSWM Staff</b> <i>initial below</i>	<b>Foster Parent</b> <i>initial below</i>

HSWM Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Foster Signature: \_\_\_\_\_ Date: \_\_\_\_\_