

Foster Contract – All Animal

Animal: \_\_\_\_\_



Animal's Name: \_\_\_\_\_ Breed: \_\_\_\_\_

Sex: \_\_\_ M \_\_\_ F Spayed/Neutered \_\_\_ Y \_\_\_ N

Age: \_\_\_\_\_ Coloring / Markings: \_\_\_\_\_

Good with: Cats \_\_\_ Dogs \_\_\_ Children \_\_\_ Unknown \_\_\_ (check all that apply)

Must not be placed in homes with: Cats \_\_\_ Dogs \_\_\_ Children \_\_\_ (check all that apply)

Explanation: \_\_\_\_\_

This is a binding and enforceable contract between \_\_\_\_\_ (herein after referred to as Foster) and K9 Kismet Dog Rescue (herein after referred to as K9 Kismet). By signing this agreement you agree to all the following items and if at any time one of these stipulations is violated, K9 Kismet has the ability to take actions against said foster on a case-by-case basis.

1. As a K9 Kismet foster, I agree to foster this animal until such time that their owner is able to reclaim them. I understand that the duration of the length of foster is for a period of six (6) months or less. \_\_\_\_\_ (foster's initials)
2. I agree to care for the above described animal in a humane and responsible manner and to provide it with clean and adequate shelter, food, water, and veterinary care. I agree to have the pet examined by a licensed veterinarian if the animal needs to have veterinary care for any reason. The licensed veterinarian may be of my choosing with prior approval of K9 Kismet, however, I understand that if possible, a K9 Kismet pre-approved veterinarian should be the first option for medical treatment. Medical treatment includes but is not limited to wellness visits, treatment for pre-existing or newly occurring illness, routine vaccinations, and dental care. \_\_\_\_\_ (foster's initials)
3. I agree to care of the above described animal in an indoor living environment and make every reasonable attempt to integrate the animal into my family. I agree to work with a trainer, if needed, to help integrate the animal into my home and into my pack. \_\_\_\_\_ (foster's initials)
4. I agree to keep K9 Kismet tags on the animal at all times while in my care so the animal may be easily returned to K9 Kismet in the event the animal is lost, stolen, or deceased. \_\_\_\_\_ (foster's initials)
5. I agree that I am the primary care giver for the animal. I shall not sell, give away, abandon, or otherwise dispose of said animal to any person(s), dealer, retailer, auction, humane society, animal control, institute, or any other entity for any reason. The animal is not my property and remains property of K9 Kismet until such time that they may be returned to their owner. \_\_\_\_\_ (foster's initials)
6. If at any time I can no longer provide care for said animal, I agree to return animal to K9 Kismet as well as any care and feeding items (beds, collars, crates, etc) furnished to me by K9 Kismet. I understand anything purchased by me and not reimbursed by K9 Kismet remains my property.
7. I hereby agree to fill out an expense report form within 30 calendar days of the incurred expense to be reimbursed by K9 Kismet. I agree to provide receipts for expenses and attach them to the expense report form upon submittal. Any expense report submitted after 30 calendar days from date of purchase may not be reimbursed by K9 Kismet and will be subject to availability of funds. \_\_\_\_\_ (foster's initials)

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8. I understand I have the right to request that K9 Kismet deliver items for the continued care and feeding of the animal. If I choose to exercise this option in place of purchasing items for reimbursement, I agree to give K9 Kismet five (5) calendar day notice so they may make arrangements to have goods and services provided to me.
9. I agree to keep the animal at my home and keep my contact information current for K9 Kismet at all times. Change in residence or contact information must be relayed in writing to K9 Kismet. Email notification is acceptable. \_\_\_\_\_ (foster's initials)
10. I hereby understand and agree that K9 Kismet makes no representation or warranties, expressed or implied, about the above mentioned animal's temperament, behavior, or condition. I understand my role is to help K9 Kismet provide shelter and care for the animal until it can be reunited with its family. \_\_\_\_\_ (foster's initials)
11. I agree to provide a home for the animal for a period no longer than \_\_\_\_ months and understand the duration may be shorter. \_\_\_\_\_ (foster's initials)
12. I agree to return to K9 Kismet the animal at the end of the specified duration or when the animal can return to its owners, whichever is sooner. I understand that under no circumstances may I attempt to keep the animal as my own. If, in the event, this contract expires and the owner cannot redeem their animal, I have the first right of refusal to adopt the animal. \_\_\_\_\_ (foster's initials)

Foster's Name \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

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

K9 Kismet Representative: \_\_\_\_\_ Date: \_\_\_\_\_