

I, \_\_\_\_\_, agree to provide temporary foster care for described animal(s) in this agreement from the KVHS. I understand that the custody of the animal(s) will be temporary, and that upon the request of the KVHS I will return said animal(s) to the Society's shelter located at 10 Pet Haven Lane, Augusta, ME 04330.

As Foster caretaker for the animal(s) described in this foster agreement, I agree to comply with the following regulations:

1. I hereby acknowledge receiving the animal(s) described in this foster agreement.
2. I agree that the animal(s) remain sole property of the KVHS.
3. I agree to provide the animal(s) with good and loving care, including but not limited to food, water, shelter, socialization, and medication when required.
4. I agree to comply with all instructions received from the KVHS and will **NOT** alter from any instructions as to the care and maintenance of said animal(s) without consulting with the Senior Animal Care Technician.
5. I agree to telephone the Senior Animal Care Technician at (207) 626-3492 to advise him/her of any emergencies involving the animal(s), for pre-approval of non-emergency veterinary care, and also on a weekly basis to advise the SACT of how the animal(s) are.
6. I understand that the KVHS will pay all veterinary treatment costs that may be incurred for the animal(s) during Foster Care; provided that KVHS has given prior approval by telephone for such treatments, in the event of an emergency, I will attempt to contact the KVHS before seeking veterinary care as soon as possible under the circumstances.
7. I authorize the KVHS to inspect the housing and care of the animal(s) listed on this contract at any time, and will present such animal(s) to an authorized agent of the KVHS on demand.
8. I agree to properly supervise said animal(s) at all times. I will be physically present if said animal(s) is allowed outside during which time said animal(s) will either be in a fenced in area and/or leashed. **I will keep cats inside at ALL times. I will keep dogs leashed and under my control at ALL times.**
9. This agreement is not transferable. If I am unable to care for the said animal(s), I will immediately return the animal(s) to the KVHS during normal business hours. **I understand and acknowledge that I do not have any right or authority to place the said animal(s) in other homes or places with other individuals.**
10. I understand that the KVHS will be responsible for the adoption screening and ultimate placement of said animal(s). I understand that animal placement is not part of my responsibility or authority under this agreement.
11. I agree to hold the KVHS harmless from any direct or consequential damages arising out of this Foster Care Agreement.
12. I understand that any false statements on this application constitute grounds for denial of application. The Kennebec Valley Humane Society reserves the right to refuse to foster to any person(s).

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**KVHS WITNESS:** \_\_\_\_\_

**Kennebec Valley Humane Society  
Foster Application**

Our mission is to care for; protect and place animals for adoption in lifelong homes; and to prevent the cruelty to animals by educating our community in the proper placement and care of all animals.

**Personal Information:**

Name \_\_\_\_\_ Name of Co-Applicant \_\_\_\_\_

Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Work) \_\_\_\_\_

Employer \_\_\_\_\_

Email Address \_\_\_\_\_

**HouseHold Information:**

What type of home do you live in?  house  apartment  trailer  condo  duplex

Do you own or rent?  own  rent

If you rent, you will be asked to provide a copy of the lease agreement or the KVHS staff will be happy to contact your landlord to verify the type and number of pets your lease allows.

Landlord's Name \_\_\_\_\_ Phone \_\_\_\_\_

**HouseHold Environment:**

Do all members of your household know you plan to foster a pet?  yes  no

How many children reside in your home? \_\_\_\_\_ Ages \_\_\_\_\_

Is anyone in your home allergic to pets?  yes (list) \_\_\_\_\_  no

Do you have a separate room where the animal(s) can be isolated of required?  yes  no

Are there any special considerations as to the temperament or health of your animals that KVHS needs to consider before placing a foster pet in your home?  yes  no

If yes, please explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Current Pets:**

Please list all current pets that live in your home

Name	Age	Sex	Breed	Length Owned

Veterinarian \_\_\_\_\_ Phone \_\_\_\_\_

What training methods will you use to handle potential problems such as barking, chewing, scratching, etc.? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Fostering Interests:**

What kinds of animals are you looking to foster?

	Yes	No	Cat	Dog
Injured Animals				
Pregnant or Nursing Animals				
Minor Medical Condition				
Minor Behavioral Condition				
Animal Belonging to Someone Who Is Ill				

Are you willing to take a dog or puppy that may not be housebroken?  yes  no