



FOSTER CONTRACT

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Home Phone: _____

Cell Phone: _____ Other: _____

I'm fostering: Cat: ___ Dog: ___ Male: ___ Female: ___ Age: ___

Name of Animal: _____ Tag #: _____

Breed: _____ Color: _____

Medical Health: _____

Medications/Treatment: _____

1. I understand that FOWA Rescue does not knowingly misrepresent any animal's age, condition of health or temperament.
2. I agree to foster this animal until it becomes adopted. If I cannot continue to foster this animal, I agree that I must return this animal to FOWA and will contact them at least two (2) weeks prior to give ample time to find another foster home.
3. I agree that this animal, if a cat, must be kept as an inside cat only and, if a dog, must be primarily an inside dog unless otherwise approved by FOWA.
4. I understand that FOWA will pay for all veterinary care but that I will be responsible for transporting the animal to one of the approved veterinarians for routine checkups and vaccinations when they are due and as notified by a FOWA representative.
5. I understand that FOWA will either provide or reimburse the foster home food, supplies and medications necessary for the care of the foster animal.
6. I agree that this animal is the sole property of FOWA and cannot be given or adopted to anyone without FOWA's prior written permission. If I should find someone interested in adopting this animal, then I agree that the adoptive home must complete all FOWA paperwork and be interviewed by a FOWA representative.
7. I agree that FOWA reserves the right to inspect the foster home environment of this animal I am fostering, at any time, and can reclaim this animal if the terms of this contract are not being met or if the animal is not being properly cared for.
8. I agree that this animal must be brought to any FOWA animal adoptions they require.

E-Signature (Type your name)

Date

Approved by FOWA - Signature

Date

Application Instructions:

- Save the Foster Contract to your computer's desktop.
- Complete all fields (*form friendly*) and "SAVE" it.
- Email the completed form as an attachment to the following email address:
fowarescue@yahoo.com
- If you have questions or need any assistance with completing the application, call the FOWA Help Line at: **(973) 902-7515**.