

## Foster Care Agreement

<b>Animal Description:</b>	Name	Color	Species	Breed	Gender	Age	Micro-chip#
OK with kids? [ ] Yes [ ] No			OK with other animals? [ ] Yes [ ] No			Medical problem? [ ] Yes [ ] No	
Cats, cage birds, pocket pets, and others as specified must be kept inside the house.							
Foster Care Premise:		Owner:			Phone#:		Email:
Address:							
Fenced yard/paddock [ ] Yes [ ] No - if no, this premise may not foster outside animals							
Shelter from sun/rain: [ ] Yes [ ] No - if no, this premise may not foster outside animals							
Children in home: [ ] Yes [ ] No				Other animals in home [ ] Yes [ ] No			
Signature of foster care provider:					ARG# if member:		
<b>ARG Veterinarian statement:</b>							
HWT results: [ ] Pos [ ] Neg Treated with:							
Coggins results: [ ] Pos [ ] Neg N.B. EIA is reportable							
FeLV results: [ ] Pos [ ] Neg Vaccination status:							
FIV results: [ ] Pos [ ] Neg					Vaccination status:		
Fecal results: [ ] Pos for [ ] Neg					Treated with:		
Rabies vaccination status:							
Other vaccinations given:							
Other health information:							
Medications:							
Inside only or other specifications:							
Veterinarian's signature:					License #:		
<b>Has the owner of this animal been confirmed?</b> [ ] Yes [ ] No							
If yes:							
Owner's name:							
Contact phone:					Contact email:		
Contact address:							

Expected duration of foster care:			
Reason for foster care:			
Owner's signature:			Date:
If owner is not known, we will continue to attempt to find the owner and reunite them with this animal. If owner is not found within 180 days from the date of admission to ARG care, or if owner relinquishes this animal's ownership to ARG, this animal will be available for adoption.			
<b>First in line to adopt:</b>			
Name	Mailing Address	Phone#	Email
Second in line to adopt:			
Name	Mailing Address	Phone#	Email
Third in line to adopt:			
Name	Mailing Address	Phone#	Email