

FOSTER CARE APPLICATION

Clinton Animal Shelter
1307 N. Washington
Clinton, MO 64735
660-885-7999

Today's Date: _____

INTERESTED IN FOSTERING: Dog _____ Cat _____ Both _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____

EMAIL: _____

Have you ever had a puppy that had Parvo?

If so, when and at your current home?

Do you own or rent your home?

If rent, are you allowed pets?

Any breed restrictions in your area?

Do you have a fenced in area?

If yes, what kind of fence?

Do you live near a busy road?

Are there aggressive dogs in your neighborhood?

How many people live in the home?

If kids, what are their ages?

Who will be the primary care giver of the animal?

Do you have any other pets?

What type/breed?

Age/Sex?

Spayed or neutered?

Temperament?

Do they get along with other dogs/cats?

Brief description of history of pet ownership:

Veterinarian's Name:

Veterinarian's Phone:

Personal Reference:

Phone:

Where will the dog/cat spend the day?

Where will the dog/cat be during the day when you are gone?

Where will the dog/cat spend the night?

What issues will you be unwilling to work with?

As a foster for the Clinton Animal Shelter, you agree to the following terms.

-Any veterinary care needed for the foster animal must be approved by a shelter representative and performed by a shelter approved veterinarian.

-The animal is considered property of the Clinton Animal Shelter and will not be adopted, sold or given away under ANY CIRCUMSTANCES.

-All dogs in foster care will only be taken outside on a leash or placed in a fenced yard. They will never be let out loose or tied outdoors.

-All cats in foster care will ALWAYS be kept strictly indoors.

-Any foster animal can be removed from a foster home at any time.

I have read and agreed to these conditions to fostering an animal for the Clinton Animal Shelter.

Signature: _____ Date: _____

Foster Release and Hold Harmless Agreement

THIS RELEASE is executed by _____ (hereinafter "Foster") in favor of CLINTON ANIMAL RESCUE ENDEAVOR, LLC (hereinafter CARE).

Foster, for him/herself, his/her legal representative(s), heirs and assigns, for good and valuable consideration, hereby release, waives, and discharges CARE, its directors, officers, employees, members and volunteers, from all liability to the Foster, his/her spouse, legal representative(s), heirs and assigns for any and all loss or damage, and any claim or damages resulting there from on account of injury to Foster's person or property, even injury resulting in the death of the Foster, in connection with or during and such Foster activities caused by the negligence of C.A.R.E.

The Foster understands that, as a Foster for CARE, he/she may come into physical contact with animals of unknown origin or questionable health history, and/or which have not been treated for diseases, which may be transmittable to humans or other companion animals.

The Foster understands that when handling animals, Foster may be scratched or bitten, thus creating a risk of tetanus. Foster acknowledges that CARE recommends, but does not require, tetanus shots to all Fosters who will handle animals. The Foster also understands that CARE recommends prompt medical attention (including tetanus shots) for all animal bites, particularly puncture bites from cats, but CARE will not reimburse Volunteer for such treatment. **The Foster acknowledges C.A.R.E. does not provide any health insurance for any injury sustained by Foster.**

The undersigned Foster understands and acknowledge there are inherent dangers in volunteering that no amount of care, caution, instruction, warning or expertise can eliminate.

I certify as true and agree with all the statements made above on the Foster Application and Foster Release and Hold Harmless Agreement.

Foster Signature _____

Foster Printed Name _____

Date: _____

LANDLORD INFORMATION AND PET APPROVAL

I, _____ (print) am the landlord, owner, or
management company for the following apartment complex/home/duplex

_____ located at
_____.

I approve my tenant (name) _____

to have a pet DOG CAT (circle one) at the address listed above.

Signature of landlord/owner

Contact phone number and email address

Initial _____