

FOSTER CARE AGREEMENT



ALL FOSTER PLACEMENTS ARE SUBJECT TO APPROVAL AT THE SOLE DISCRETION OF FOSTER CARE MANAGEMENT.

THE PARTIES HERETO AGREE AS FOLLOWS:

The Foster Parent signing below hereby acknowledge the receipt of animal(s) for foster care from the Chula Vista Animal Care Facility. By the acceptance of an animal or animals and in the consideration for being entrusted with the care, custody, and possession of the animal(s), agrees to be bound by the covenants and conditions stated on this agreement.

Name _____ CA Identification # _____

Address _____ City _____ State _____ Zip _____

Daytime Phone Number (_____) _____ Evening Phone Number (_____) _____

Email address _____ Occupation _____

AS BETWEEN THE FOSTER PARENT AND THE CHULA VISTA ANIMAL CARE FACILITY (CVACF):

- The Foster Parent shall provide the animal(s) with good care, including but not limited to, food, water, shelter, grooming, training and medication when required.
- The animal(s) shall remain the sole property of the CVACF.
- The animal(s) shall be returned to the CVACF upon request, or if the Foster Parent is relocating outside of the San Diego area.
- Agents of the CVACF will be allowed to inspect the premises in which the animal(s) will be/are maintained from time to time, for the purpose of determining the suitability of those premises for the care and maintenance of the animal(s).
- The Foster Parent understands and acknowledges that he/she does not have any right or authority to keep the foster animal(s) or to place the foster animal(s) in other homes or places with other individuals unless permission is given in writing by the CVACF.
- The Foster Parent understands and acknowledges that he/she is responsible for all expenses incurred as a result of fostering an animal. The sole exception to this is that the CVACF will provide at no charge, the food, formula, medications, vaccinations, all veterinarian care, and other necessary supplies. All other expenses will be the Foster Parent's responsibility.
- The Foster Parent agrees that should the animal(s) require medical attention or treatment, the CVACF will request immediate return of the animal(s) for treatment at the CVACF.
- The Foster Parent agrees to defend, indemnify and hold the CVACF harmless from any direct or remote and consequential damages arising out of this foster care arrangement.

FOSTER PARENT:

Foster Parent Signature _____ Date _____

I would like to be informed of activities in my community involving animals!

FOR THE CHULA VISTA ANIMAL CARE FACILITY:

Foster Care Management Signature _____ Date _____