

Christina Morgan (805) 890-1857  
Chad Atkins (805) 616-4101  
info@pawworks.org



## Foster Care Contract

Animal's name: \_\_\_\_\_ Weight: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Spayed/Neutered: Y or N

Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Rabies date: \_\_\_\_\_

Microchip #: \_\_\_\_\_ ID Number: \_\_\_\_\_

Date foster care period begins \_\_\_\_\_

I understand that I will provide foster care for the above mentioned dog from Paw Works (PW) at no charge, and I agree to the following conditions during the foster care period:

**1. I will accept and consider the dog as a household companion, not as an outside pet, and will provide the dog with a safe environment, humane treatment, and give proper food, fresh water, shelter and exercise, and I will allow a reasonable amount of time for the dog to adjust to new surroundings.**

\_\_\_\_\_ Initials

**2. PW will cover veterinary expenses for the dog, provided that the veterinary care is pre-approved by the PW Director and performed by a PW authorized veterinarian. PW will not reimburse for any medical care unless it is pre-approved by the PW Director and performed by an PW authorized veterinarian. Any expenditure beyond food, approved medical treatment, and worming requires an approval by PW. The foster family may be responsible for unapproved expenditures.**

\_\_\_\_\_ Initials

**3. I will immediately notify PW at 805-890-1857 if the dog is lost or stolen, and I will make every reasonable effort to recover the dog.**

**4. I will NOT give or sell the dog to another person, relative, or any other individual, or any rescue group, humane association, shelter or pound, or any medical or experimental laboratory or any organization.**

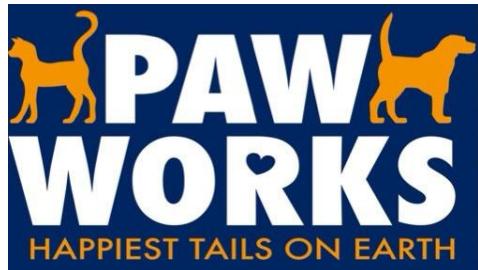
**5. I will NOT alter the dog's appearance in any way, shape or form (e.g. cropping, docking) except for routine grooming.**

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6. I will immediately notify **PW** in the event of the dog's death during the foster care period.
7. I will allow an **PW** representative to make periodic visits to my home during the foster care period.
8. I will immediately notify **PW** of any change in address or telephone number, or of any plans to move or travel with or without the dog.
9. I will immediately notify **PW** of any change in circumstances that may prevent me from providing foster care during the time period agreed upon under this foster care agreement.
10. I will immediately return the dog in good condition to **PW** if at any point and for any reason **PW** requests that I surrender the dog.
11. Should I decide to permanently adopt the dog, I will notify **PW** and, upon approval will follow established adoption procedures and adoption fees.
12. I understand that the dog has been checked, spayed/neutered and vaccinated by a licensed veterinarian and that the dog's health is accurately represented to the best knowledge of **PW**. However, I further understand that no representations are made by **PW** as to the temperamental or mental disposition of the dog.
13. I agree to foster the dog at my own risk, and indemnify and release **PW**, its Officers, Directors, and volunteers, of any and all liability arising from damages to person(s) or property caused by the dog.
14. \_\_\_\_\_ (check if appropriate). A crate belonging to **PW** has been loaned to the foster home and will be returned when the dog is returned or adopted. Failure to return the crate will result in a charge of \$100.
15. All donations received in connection with the adoption of the dog(s) will only be received by **PW**.
16. The foster family may end this agreement at any time, but **must give PW at least 5 business days** to make other foster arrangements. Any non-emergency boarding costs incurred during this 5-day period are the responsibility of the foster home.
17. The foster family agrees to crate the dog or keep the dog inside the home in a safe place separated from other pets while not at home or while not being supervised. The dog may not be left outside while unsupervised unless approval has been given by **PW**.

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18. The Fosterer agrees to hold Paw Works free and harmless of and from any loss or liability, of any nature whatsoever arising out of or in any way connected with the fostering of said animal and/or the performance of this Agreement, including loss or liability caused by the Foster's active negligence.



**Foster Care Provider's Information:**

Name: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Email: \_\_\_\_\_

Address/City/State/Zip\_\_\_\_\_

Phone: \_\_\_\_\_

I have read and fully understand the terms and conditions of this agreement, and agree that it is not arbitrary and that provisions herein are common in pet foster care agreements. I further understand that if I fail to comply with any of the terms specified herein, PW has the right to reclaim the dog, and to enforce this contract in a court of law.

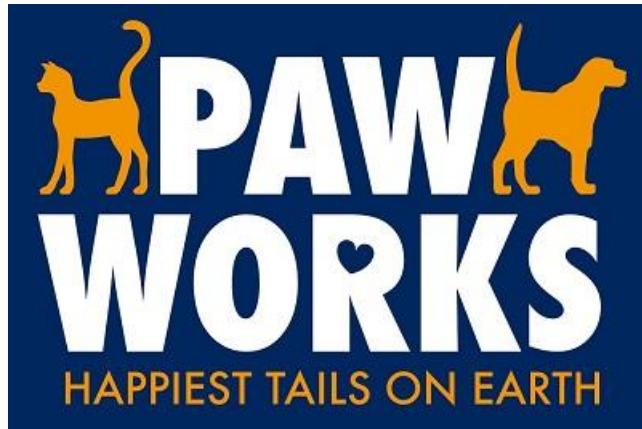
X \_\_\_\_\_  
Foster Care Provider(s) Date

X \_\_\_\_\_  
Paw Works Representative Date

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Camarillo, CA 93010

[www.pawworks.org](http://www.pawworks.org)  
[www.facebook.com/pawwork](http://www.facebook.com/pawwork)  
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## **Agreement to Adopt/Foster and Release of Liability**

I understand and agree that I am adopting an animal from Paw Works "as is" with no warranties of any kind, and that Paw Works is not in a position to provide me with a reliable history regarding any abandoned, stray, or relinquished animal, particularly with respect to such animals behavior and temperament, propensity for viciousness, ability to interact with children, and the ability to interact with other animals. I voluntarily agree to accept the risks of foster/adopt under such circumstances, and to the fullest extent permitted under applicable law, I hereby waive any and all claims and causes of action for property damage and personal injury (including death) that I may have against Paw Works and their officers, agents, and employees, arising out of the future conduct of the animal I am fostering/adopting. I understand that in the event I am not satisfied with animal that I am fostering/adopting, my only recourse is to return the animal immediately to Paw Works.

I further agree to practice responsible pet ownership and to familiarize myself with the controlling ordinance of the jurisdiction where I live with respect to issues such as leash law, control of animal nuisances, and removal of defecation. I also understand that as a dog owner, I am subject to the provisions of Civil Code section 3342, which states in pertinent part: "The owner of any dog is liable for damages suffered by any person who is bitten by the dog while in a public place or lawfully in a private place, including the property of the owner of the dog, regardless of the former viciousness of the dog or the owner's knowledge of such viciousness...."

Signature \_\_\_\_\_ Date\_\_\_\_\_

Printed Name \_\_\_\_\_

Paw Works \_\_\_\_\_ Date\_\_\_\_\_