

Critter Mama Rescue ~ Foster Agreement 2017

I/We the under signed agree that while _____ a Male ___ Female ___ Dog/Puppy or Cat/ Kitten who's DOB/Age _____, Color is _____, Breed _____, Microchip # _____ and Plan _____; will remain in our care, for the purpose of Fostering for Critter Mama Rescue, Inc. I/We will be entirely responsible for her/his care 24/7 until the dog/puppy is either returned to Critter Mama Rescue, or adopted by me/us or by another Adopter selected by Critter Mama Rescue, Inc.

- Dailey feeding times are about 7AM and 6PM. Currently, we only feed Fromm Family Dog Food Kibble or for cats Nutro Salmon Kibble and Nutro MAX CAT wet canned foods. Please, adhere to those products.
- Typically, our Dogs, Puppies, Cats and Kittens do not get "treats". Kibble works great as a Treat!
- At no time is the Dog/Puppy - Cat/Kitten allowed other foods or liquids, except clean water 24/7.
- The Dog/Puppy - Cat/Kitten may NOT have any "People Food" especially anything containing: Wheat, Corn, Dairy, Soy, GMO's, any "by-products" or any products with Glycerin, extra Sugar, Xylitol or artificially colored ingredients.
- They may have tiny bits of home cooked un-spiced skinless/boneless boiled chicken or fish.
- Our Cats and Kittens only use Dr. Elsey's Ultimate Precious Cat Litter.
- CMR will be responsible for all Medical expenses and needed care while you are Fostering, unless YOU are found responsible or negligent for any accident or tragedy to our Rescue Dogs, Puppies, Cats or Kittens.
- YOU will be responsible for daily life of the Animal: Food, Water, Toys, Activities, at home bathing and professional grooming preferably by "Paws on the Go", daily exercise, additional training and behavior lessons as needed. Always treat the animal as if it was a part of your Family.
- This Animal may be adopted at any point by you or someone else.
- Should you decide to adopt this Animal – PLEASE notify us as soon as possible.
- Should CMR have another potential Adopter wanting to visit with the animal, arrangements will be made that will consider your time and availability at your home, or for someone from CMR to retrieve the animal.

CMR will provide for your use if Needed:

Food and Water bowls, a Feline Litter Box, Feline litter, Toy(s), Nylabones, a Collar with attached microchip tag (if available), a CMR information tag, possibly a harness and a Leash. **NO Zip Leashes ever!!!** If needed we will provide a plastic Travel Crate and/or a Black Wire, Metal Crate for use during the Foster program.

In some cases we will also provide for your use during Fostering: a bed or bedding, shampoo, conditioner, comb, brushes or other items. All items are to be returned to CMR at the end of the Fostering period.

Dogs and Puppies are crate trained and housebroken. Cats and Kittens may or may not be crate trained, but are litter box trained. Your initial _____ CMR Initial _____

For the Safety of this animal - During this Foster Program this Animal may NOT:

- Be taken outside off a leash at anytime, for any reason.
- Go to any Park, Dog Park or any location away from your personal home and immediate yard.
- Go to any Beach, Swimming Pool or be in a Boat of any kind, without written permission from Robin Roberts, CMR, President.
- Go to any Public activity for the first TWO months of Fostering. i.e. family outings, family reunions, kids sporting events, etc.
- Interact with any other animal(s) that YOU Do Not Personally own, other than animals in your home that have been previously known to CMR during your Home Visit, unless approved by Robin Roberts, CMR President.

YOU MUST IMMEDIATELY NOTIFY CMR 813-507-0509 of the following:

- Should the Animal for any reason escape, run away or become missing or lost: You must immediately begin searching for them as the animal does not know your area, your scents, or your neighborhood. Time is of the essence in finding a Rescue Animal placed in a Foster Home as they are unfamiliar with your area. They can travel many miles trying to find their old "home" with us or their previous owners. Make flyers and post them ASAP! Rescue Animals/Fosters Animals are known to sneak out a door/window, or bolt through a door without warning. They will be in grave danger instantly.
 - Should the Animal get injured and/or should the Animal injure any other animal or human, for ANY reason while in your care: YOU are agreeing to accept full responsible for any/all Veterinarian, Medication, Hospitalization costs to bring the Animal back to whole and healthy.
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IMPORTANT!

Should the Animal become sick for any reason contact:

About Pets, INC our local Veterinarian, Dr. Mark Wallace 813-838-4258 or www.aboutpetsinc.org to make an appointment.
Mobile Vet Services ONLY! Typically, Monday, Wednesday, Friday and Saturday 4 weeks of the month.

DeSoto Veterinary Clinic 941-748-2637 2910 Manatee Ave. West, Bradenton
Open 8AM-5:30PM Monday-Friday and Saturday 8AM-Noon

If there is an animal EMERGENCY, contact:

Bradenton Veterinary Emergency 941-748-0202 2910 Manatee Ave. West, Bradenton
Open 5:30PM - 8:00AM Monday-Friday Saturday, Sunday and Holidays 24hours

BluePearl TAMPA Veterinary Partners 813-932-2414 3000 Busch Lake Blvd, Tampa
Open 24 Hours/7 Days a week

These Vets will decide on the cause and treatment for each animal. If the Veterinarian(s) believe(s) the animal became sick while in your care, due to negligence or exposure on your part, then you are agreeing to be fully responsible for any and all Vet bills.

Your initial _____ CMR Initial _____

This Animal comes to you:

- Fully vetted, including Up-To-Date Rabies, DH2PP, FVRCP, Microchipped, spayed or neutered. This Animal takes monthly Flea and or Heartworm Prevention the 15th of each month. CMR will supply this to you during Fostering.
- You will be provided a Vet supplied document regarding current vaccinations.
- Be aware, our Animals are allowed on our furniture and sleep in our beds, if they choose.

How many hours a day will the animal be left alone or crated? _____

Are you willing to leave the TV or Radio or Music on while you are away? Yes No

Are you comfortable with crating this Animal for several hours if you are away from home? Yes No

1. Which would you prefer to foster? (Choose all that apply) Puppy Dog Cat Kitten

Youth Adult Senior Small Medium Large Specific Breed(s): _____

2. How many fosters are you willing to have at any given time? _____

3. Are you willing to litter box train a Cat/Kitten? Yes No Are you willing to Housebreak a Dog/Puppy? Yes No

4. What is your method of Litter Box or Housebreaking Training? _____

5. Are you willing to foster the animal until it is successfully adopted? Yes No

6. Sometimes a foster can remain with a family for several months. Do you have a time limit on how long the foster may remain with you? Yes No If there is, please explain _____

7. Do you own a crate to house the animal while unattended? Yes No

8. Do you agree to hold CMR harmless from any damages to your home that may occur due to not keeping the animal crated when unattended? (Note: It will be assumed if the damage is substantial; the animal was not crated while unattended.) Yes No

9. Please describe your experience with handling animals with respect to behavioral discipline (such as chewing, barking, etc.)

10. Are you willing to continue fostering the animal if it becomes ill? Yes No

11. Are you willing to make any necessary medical office visits, administer medications and/or provide special diet to THIS FOSTER animal if necessary? Foster families are required to supply food, additional toys and items of comfort for our Fosters. CMR will cover only those medical expenses that have been pre-approved prior to an office visit and must be rendered by an approved CMR Vet.

12. In case of illness, are you able to separate pets in the household? Yes No

13. Do you agree to hold CMR harmless from infections and diseases to your pet(s) that are spread by this Foster animal? (CMR will only cover the medical costs for a CMR foster.) Yes No

14. In which type of dwelling do you live? Apartment Duplex Condo Town Home Single Family Home

Single Family Mobile Home Other _____

15. Do you rent or own your dwelling? Rent Own

16. If you rent, please provide the name, address and phone number of your landlord. (Please attach proof to this application that you are allowed to have animals in your rented dwelling. Proof may be submitted via email to CritterMamaRescue@gmail.com

Landlord Name _____ Phone _____

Street Address/City/State/Zip _____

17. Do you have a fenced in yard? Yes No

18. If yes, what type of fencing: Wood Chain Link Brick Vinyl Other _____

19. How high is fencing: 4 ft X 5 ft 6 ft Other _____

20. If you do not have a fenced-in yard, do you agree to walk the animal only on leash/harness? Yes No

21. The Foster animal must NEVER be left outdoors unattended? Agree Can Not Agree

22. Do you own a pet(s)? Yes No

23. If yes, please list names and breeds: _____

24. Is/Are your pet(s) spayed or neutered? Yes No If not, explain why not. _____

25. Is your pet(s) current on the following?

Heartworm preventative Yes No Type of preventative: _____

Parasite (worm) control Yes No Type of control: _____

Flea control Yes No Type of flea control: _____

Rabies Yes No DHLPP Boosters Yes No Bordetella (kennel cough) Yes No HW Test Negative Positive

FVRCP Boosters FeLV Booster

26. What is the name of your current veterinarian: _____

27. Clinic Name: _____ Phone: _____

28. Has your pet(s) had experience with other animals in the household? Yes No

29. How you will handle the introduction and/or problems that may arise with your pets and our Rescue animal?

30. Are there children in the household? Yes No If yes, indicate how many and ages.

31. Does anyone in the house have any known allergies to dogs or cats? Yes No

32. How many hours per day will the Foster Animal be left alone? _____

33. Have you ever applied for or adopted a dog or cat, Puppy or Kitten from CMR? Yes No

If yes, what was the animal's name at time of adoption? _____

34. Are you prepared to bring the Foster to all adoption opportunities? Yes No

35. Do all adult family members agree to this foster program? (Their signature will be required below.) Yes No

36. Do you agree to unannounced visit(s) from CMR to your home? Yes No

37. Do you agree to notify CMR in advance of needing to have the Foster animal placed elsewhere and to allow sufficient time, which may take several weeks, to locate a new foster home? Yes No

38. Do you agree to not place the foster animal with anyone other than a person personally interviewed by CMR, and who has filled out an Adoption Application and a Foster Application with necessary information about themselves, and who has been approved by CMR in writing, to keep this animal for a few hours or during an emergency? Yes No

39. Do you agree to surrender, under any circumstance, the Foster animal if requested to by a CMR? Yes No

40. Many dogs, puppies, cats and kittens come from histories of abuse or neglect. If accepted, you will be given Foster Guidelines that recommend the fostered animal be watched initially for signs of destructive behavior. If destructive behavior is noticed, there are steps to take such as verbal and physical praise but only verbal disapproval, etc. Do you agree to isolate or otherwise handle any destructive behavior appropriately without the use of physical discipline? Yes No

41. By checking this box, do you understand that, if approved, this is considered a legal signed contract? Yes No

42. Do you understand and accept that as a rescued or relinquished dog/puppy or cat/kitten, this animal may have behavioral issues. Do you hereby agree to hold Critter Mama Rescue, Inc. and all agents, assigns, volunteers, employees, and officers harmless should the Foster Dog/Puppy or Cat/Kitten bite you or anyone else, or if other behavioral problems arise that cause injury to you or others. Your initial _____ CMR Initial _____

43. If at any time there arises a dispute regarding this Foster Agreement, I/We agree that any litigation shall be brought in a court in Hillsborough County, State of Florida, and that Florida law shall govern. Prevailing party in any dispute shall recover attorney's fees and costs. Your initial _____ CMR Initial _____

44. I/We affirm that I/We are over 21 years of age, living independently and self supporting. Yes No

Print Name: _____ Date _____

Print Name _____ Signature _____ Date _____

Robin Roberts, President Signature: _____ Date _____

Promise to Foster Families: Critter Mama Rescue will never knowingly place a sick animal or a poorly socialized animal in a foster family without first apprising the foster family of the situation. Thank you for your application.

Drop Off Date: _____ Time: _____ Pick Up Date: _____ Time: _____

CritterMama Rescue, Inc.

Visit our Facebook Page and LIKE us!

813-507-0509

CritterMamaRescue@gmail.com www.CritterMamaRescue.org

Our Mailing Address: 3848 Sun City Center Blvd., Suite #104 Ruskin, Florida 33573

For CMR use only: Application on file? _____ Foster Approved _____ Foster Denied _____

Reason: _____

Date: _____ CMR, Robin Roberts, President: _____