

Huron Humane Society Foster Agreement

Please read and initial:

____ I certify that my own animals are up to date on vaccinations and that my veterinary records may be requested.

____ I agree to keep the foster animal(s) indoors, unless otherwise approved by a shelter employee.

____ Should the animal become ill within my care, I agree to contact the Huron Humane Society and follow the instructions I am given for the foster animal's further care.

____ If I have veterinary care performed on the foster animal without approval from shelter management I will be liable for those costs incurred.

____ I agree to bring to animal in for their scheduled de-worming and vaccination appointments.

____ I fully understand that foster animals are always the property of the Huron Humane Society. As such, I agree that any decisions made by the Huron Humane Society regarding their care and treatment will be followed by me, including their return.

____ I agree to return the foster animal(s) as instructed. I agree to make an appointment in advance for the animals return.

____ The Huron Humane Society is held harmless should my own pets become ill from my foster animal(s).

Printed Name

Date

Signature