



Lifeline for Pets

Cat Foster Care Application and Agreement

Name of

Foster: _____ Date: _____

Home

Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email address: _____

I am willing to foster: ____ # of cats ____ Cat(s) with special needs ____ Kitten(s)

Do you have (now or ever) any pets(s)? ____ Yes ____ No (If yes, please list all current pets)

Were your previous cats Indoor/Outdoor/Both? _____

If your pets are no longer with you, what happened? _____

Are your all of your pets spayed/neutered? ____ Yes ____ No

Have your cats been tested for FIV? ____ Yes ____ No

Are all of your pets current with their shots, preventative flea/tick care? ____ Yes ____ No

Current

veterinarian: _____

Do you own or rent your home? ____ Own ____ Rent If renting, does lease allow? ____ Yes ____ No

Landlord Name: _____

Phone : _____

Do you have children? ___Yes___No (If yes, what are ages?) _____

Where will foster animal will be kept: _____

Will you allow us to visit the foster animal at your home? ___Yes ___No

Will you allow potential adopters to visit the foster animal at your home? ___Yes ___No

Will you abide by all animal control laws (current shots, spay/neuter, etc.)? ___Yes ___No

Will you abide by our rules and policies for animal care? ___Yes ___No

By signing this application, you certify that the answers provided above are true and that you accept the terms stated above.

Signature of Foster Applicant Date



Lifeline for Pets

Cat Foster Agreements

You have the right at any time to apply to adopt your foster pet. If you want to do this, you must apply and qualify for adoption the same as any adopter.

Lifeline for Pets agrees to pay for medical care of the foster cat only if such care has been specifically pre-approved on a case-by-case basis by Lifeline for Pets. All veterinarian appointments and medical care must be arranged through the Lifeline for Pets Foster Care Coordinator.

Please initial your acceptance of the following agreements:

_____I agree to contact Lifeline for Pets if the foster cat needs medical treatment, including but not limited to preventative care such as flea prevention, shots and tests.

_____I agree to request pre-approval for medical treatment and veterinarian appointments. All medical expenses will be paid by Lifeline for Pets. Lifeline for Pets is not responsible for any medical expenses incurred by your current household pets.

_____I agree to safely transport the foster cat to and from any veterinarian appointments, cat adoption showings or any other place that it is necessary to take the foster cat for health or adoption reasons.

_____I agree to keep the foster cat indoors at all times. Securely enclosed outdoor areas are permissible, however the foster cat must also have 24/7 access to indoor areas.

_____I agree to provide attention, proper care, housing, food, water, pre-approved medical treatment for the foster cat.

_____I agree to show or allow a Lifeline for Pets volunteer to show the foster cat to potential adopters and at adoption events.

_____ I understand and agree that the foster cat remains the property of Lifeline for Pets, and all final decisions about the care of the cat will be made by Lifeline for Pets.

_____ I understand that Lifeline for Pets, at its sole discretion, can take the foster cat back into its custody at any time.

By signing this application, you certify that the answers provided above are true and that you accept the terms stated above.

Signature of Foster Applicant Date

I, _____ (foster parent), agree to the following terms and conditions for fostering one or more cats (initial each item):

_____ I am willing to allow inspections at my residence prior to and during the fostering of any animal.

_____ I accept temporary possession and responsibility for any fostered animal at my own expense and risk.

_____ I agree to keep all my contact information (address, telephone numbers, e-mail address) current by informing Lifeline for Pets of any changes during the period that I foster any animal.

_____ If requested or if I can no longer foster, I will return any fostered animal to Lifeline for Pets along with copies of any medical or other records obtained while in my care.

_____ Without express approval and authority from Lifeline for Pets, I will NOT initiate adoption proceedings for any fostered animal.

_____ I will be responsible for providing any fostered animal with proper food and water, adequate shelter, any prescribed medication or treatment, current and regular flea preventative measures, veterinary care as needed, and daily exercise and stimulation.

_____ If at any time during foster care I feel that the fostered cat has behavioral problems that need to be addressed in the best interests of the health and happiness of the fostered cat, I will contact Lifeline for Pets immediately.

_____ I hereby acknowledge that I am an independent contractor and not an employee or agent of Lifeline for Pets.

_____ I hereby acknowledge and understand that Lifeline for Pets assumes no liability for damages caused by the fostered pet while in my care and custody.

Signature of Cat Foster and Date

Signature of Lifeline for Pets Foster Coordinator and Date

Lifeline for Pets -P.O. Box 2002 -Monrovia, CA 91017

Lifelineforpets.org Phone: 626-676-9505