



# FOSTER CARE CONTRACT

## A. MANAGE CAWS PHONE AND GENERAL OFFICE.

### Terms and Conditions:

- I understand that the foster animal(s) will at all times remain the sole property of CAWS.
- I agree to provide the animal(s) good loving care, including at a minimum: adequate feed, adequate water, adequate shelter that is properly cleaned, adequate space in the primary enclosure for the particular type of animal depending upon its age, size, species and weight, adequate exercise and veterinary care when needed to prevent suffering or disease transmission. I agree to notify caws if medical attention is required and, if approved, I agree to use a caws approved veterinarian.
- I understand that medicines and other supplies provided by CAWS are for use with foster care animals only, and are not to be administered to animals that are not the property of CAWS. I understand that all equipment provided by CAWS is the property of CAWS and is to be returned if the foster contract is terminated by either party.
- I understand and acknowledge that I do not have any right or authority to keep, adopt, transfer or place foster animals in other homes or with other individuals.
- I agree that every animal I provide foster care for must be physically returned to CAWS at any time upon the request of CAWS. I also agree to return the animal(s) immediately if I am no longer able to provide adequate care.
- I agree to provide CAWS with necessary information to enhance the care that I am providing to the foster animal(s).
- I agree to hold CAWS harmless from any direct or consequential damages arising out of this foster care agreement including bodily injuries such as scratches and bites.
- I acknowledge that CAWS may terminate this or any other foster care arrangement at any time for any reason.
- I certify that no person residing in the household has ever been convicted of animal cruelty, neglect or abandonment.
- I understand that CAWS will reimburse expenses for food and approved medical care.
- Foster will maintain office files of current and past intakes and disposition according to PACFA regulations
- Foster will represent CAWS at PACFA inspections.

### Foster Home Location:

Physical Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone (Home, Work & Cell): \_\_\_\_\_

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

\_\_\_\_\_  
**Signature of Foster Care Provider**

\_\_\_\_\_  
**Printed Name of Foster Care Provider**

\_\_\_\_\_  
**Date**

I have inspected and approved this foster home:

\_\_\_\_\_  
**Signature of CAWS Representative**

\_\_\_\_\_  
**Printed Name of CAWS Representative**

\_\_\_\_\_  
**Date**