



***Kokomo Humane Society
713 N. Elizabeth Street
Kokomo, Indiana
765-452-6224***

Foster Care Agreement

**I agree to the following conditions as a Foster Parent for the
Kokomo Humane Society:**

1. I certify that my own pets are currently licensed and up to date on their vaccinations, including rabies, and will have my veterinarian sign the attached Pet Medical History Form. (attach veterinarian records or completed veterinarian statement).
2. I agree to keep my pets separated from the foster animal(s).
3. I agree to keep all foster animal(s) and the mother animal indoors unless accompanied by me. Dogs must be on a leash when outside and cats are to remain indoors at all times.
4. Should the foster animal(s) become ill while in my care, I will contact the Kokomo Humane Society, which will determine treatment and/or disposition of the foster animal(s).
5. Kokomo Humane Society will not pay for or provide food and/or supplies. This is the responsibility of the foster parent. The Kokomo Humane Society will provide “starter” food, litter box and litter, and other basic supplies for the initial comfort of the foster animal(s).
6. I fully understand that the foster animal(s) are the property of the Kokomo Humane Society and that I may not under any circumstances sell or give these animals away. I agree to follow any decision made by the Kokomo Humane Society regarding the return and/or disposition of the fostered animal(s).
7. I agree to return the fostered animal(s) as instructed to do so. I understand that I must meet with the Kokomo Humane Society Shelter Manager in order to be able to return the foster animal(s) to the shelter. Kokomo Humane Society can be contacted at 765-452-6224.
8. I understand that the Kokomo Humane Society is not responsible for any property damage, illnesses or diseases, and/or injuries that may occur. Any damages, illnesses or diseases, and/or injuries occurring will be the responsibility of the foster parent.

Signature of foster parent

Date

Print Foster Parent Name:

Address:

Phone Number:

Email: