



FOSTER FAMILY – RELEASE AND SIGNATURE

FIRST NAME: _____ **LAST NAME:** _____

ADDRESS: _____

CITY, STATE: _____ **ZIP:** _____

HOME PHONE: _____ **WORK PHONE:** _____

CELL PHONE: _____ **EMAIL:** _____

I agree to act as a foster home for Arizona Beagle Rescue ("AZBR"). I understand that all dogs that come under my foster care ("Foster Dog(s)") are owned by AZBR and that AZBR is solely responsible for all decisions regarding Foster Dogs (including care and health related decisions).

I agree that all Foster Dogs will be treated in the same manner as any other member of my household, and that I will not allow any Foster Dog to run loose. I will provide all Foster Dogs with (i) proper care and attention necessary to ensure health, happiness, and well-being (including sufficient food, water, shelter, exercise, shade, a fenced yard, and large doses of love and companionship on a daily basis) (ii) and proper behavior/obedience training.

I will not tie up any Foster Dog nor will I leave any Foster Dog outside on a continuous basis. I will not use, or allow to be used, any Foster Dog for experimentation of any kind. No Foster Dog will be neglected or abused in any form.

I agree that AZBR has the right to reclaim, for any reason or no reason, any Foster Dog.

I agree not to sell, give away, destroy, or otherwise dispose of any Foster Dog without the full participation of and endorsement by AZBR.

I agree that all of the obligations and responsibilities for caring for a Foster Dog are personal to me and my family and I will not place a Foster Dog in the care of any third party unless I have made prior arrangements with the Foster Care Coordinator.

I understand that Foster Dogs may have behavioral or health issues that were not immediately apparent. I agree to release and hold harmless AZBR and its members and representatives, from any and all liability or responsibility for damages caused by any Foster Dog.

I understand that AZBR will approve, arrange, and pay for all necessary veterinary care for my Foster Dog through one of AZBR's veterinary partners. I agree to notify AZBR immediately if I believe that the Foster Dog is in need of veterinary care. In any situation other than an emergency in which the life of the Foster Dog is in danger, I understand and agree that if I take the Foster Dog to a veterinarian without the necessary AZBR approval, I will be solely responsible for the costs of such veterinary treatment and for the payment of any expenses incurred. I understand that Foster Dogs may have kennel cough, a condition that can be contagious to other dogs.

I understand that if I am interested in adopting a beagle that I am fostering, that if there is an active adoption application in the queue for my foster dog that I will not have the option of adopting that dog.

I will be acting on a volunteer basis for Arizona Beagle Rescue, Inc. (AZBR). I agree to hold harmless AZBR, its members, officers, directors, and representatives on demand from any and all loss, costs, damage, liability, and expense of every kind and description, including but not limited to attorneys' fees and litigation expenses, that may be incurred, directly or indirectly, by me or any members of my family, while acting in a volunteer capacity for AZBR or that may result from the acts of the Foster Dog in my care.

VOLUNTEER/FOSTER NAME - PRINTED

DATE

VOLUNTEER/FOSTER SIGNATURE

This page must be mailed to AZBR at the address below or handed to an AZBR volunteer before retaining an AZBR Foster Dog.

All non-emergency veterinary visits or procedures for AZBR dogs must be approved! Please email foster@azbeaglerescue.com in advance of any appointment to obtain approval.

Email: volunteer@azbeaglerescue.com

Website: <http://www.azbeaglerescue.com>

MAIL: P.O. Box 36854 | PHOENIX, ARIZONA 85067-6854 |

PHONE: 623. 977.1355 | OUTSIDE PHOENIX: 888.499.2710

REV. 05/07