



ANIMAL SERVICE CENTER OF THE MESILLA VALLEY

FOSTER CARE AGREEMENT

3551 Bataan Memorial West, Las Cruces, NM 88012
(575) 382-0018 Fax: 575.373.2819

- I, _____, understand that the Animal Service Center of the Mesilla Valley (Center) reserves the right to verify all the information on the Foster Program Application.
- _____ *Initial* - I understand that the Center reserves the right to terminate the Foster Care Agreement at any time.
- _____ *Initial* - I understand that the foster animals are the property of the Center, and that upon request by the Center I shall return any and all foster animals as soon as possible.
- _____ *Initial* - I understand that the Center may limit the number of animals being fostered at one time, and determine the length of foster care for each animal.
- _____ *Initial* - I understand that all foster animals under my care must be accounted for at all times, and if any foster animal becomes lost or escapes I shall immediately notify the Center.
- _____ *Initial* - I agree to monitor the foster animal(s) under my care for any signs of illness or injury and to notify the Center immediately if such signs are observed.
- _____ *Initial* - I understand that it is my responsibility to notify the Center immediately upon death of any foster animal that dies while under my care, and it is my responsibility to deliver the carcass of such animal to the on-duty Center Supervisor as soon as possible.
- _____ *Initial* - I understand that failure to deliver said carcass may result in an adoption fee of \$75.00 (per dog) or \$50.00 (per cat) that I shall be required to pay to the Center.
- _____ *Initial* - I agree to keep my pets separated from the foster animal(s) for at least 10 days in order to minimize the chance of my own animals becoming ill.
- _____ *Initial* - I agree to keep the foster animal(s) indoors at all times unless accompanied by me.
- _____ *Initial* - I understand that I may be contacted on a weekly basis for updates on my foster animal(s).
- _____ *Initial* - I understand that I am responsible for picking-up and returning the foster animal(s) to and from the Center, and that the Center may limit the number of foster animals being returned at one time.
- _____ *Initial* - I agree to follow any and all decisions made by the Center regarding the return and/or disposition of the foster animal(s).
- _____ *Initial* - I understand that the Center provides only basic care to foster animals and cannot provide extensive and/or prolonged treatment for sick or injured foster animals, including skin diseases.
- _____ *Initial* - I understand that the Center is not financially responsible for any damages sustained to my property as a result of foster care, and that the Center is not financially responsible for any costs I might incur through my own pet's medical bills that might have resulted from contact with the foster animal(s).
- _____ *Initial* - I agree to allow City or County Animal Control Officers to conduct scheduled inspections of my property before and during any foster period as is deemed necessary by such agencies.
- _____ *Initial* - I understand that upon fostering multiple times with multiple litters, I may become eligible for one free adoption, upon approval by the Center's Executive Director.
- _____ *Initial* - I have read and fully understand the above stated terms and conditions and agree to abide by such terms and conditions.

APPLICANT'S SIGNATURE D

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