



We Rescue, Rehabilitate and Re-Home Dogs in Need.

This Foster Agreement is made by LINZI GLASS/THE FORGOTTEN DOG FOUNDATION & CAROL ANDRADE/BARBARA BOYD/THE FORGOTTEN DOG LAS VEGAS Which Hereinafter shall be referred to as RESCUER.

I agree to foster the pet known as _____ and by doing so, I accept the terms of this agreement. I understand and agree that the RESCUER repossess the pet if there is reason to believe that the pet is being mistreated, abused [verbal or physically], neglected, or put in unsafe or unhealthy conditions.

I further understand that a RESCUER representative may make a follow up visit, at a mutually convenient time, to ascertain that all conditions continue to be satisfied. Foster pups are to only leave the home for doctor appointments and adoption events.

Foster pups are to wear the supplied martingale collar with RESCUER information attached at all times.

If your foster dog(s) are not acting right or feeling well, RESCUE MUST be notified immediately. If your foster dog requires medical attention, they may ONLY be taken to a vet hospital that the rescuer tells you to go to.

If you take a dog to your vet and do not notify RESCUE, you will be responsible for the bill.

If I fail to comply with the terms of this agreement, I will reimburse RESCUER for any costs incurred by the organization to reclaim and remedy the breach of contract [lawsuits, etc.].

Foster Parent/Print Name _____

Date _____

Address _____

State & City _____ Zip _____

Home # _____ Work or Cell # _____

Signature _____

Email _____

THE FORGOTTEN DOG FOUNDATION 1112
MONTANA AVENUE #166 SANTA MONICA,
CA 90402 (310) 990-2020
WWW.THEFORGOTTENDOG.ORG
INFO@THEFORGOTTENDOG.ORG 501(C)(3) NON-
PROFIT ORGANIZATION

THE FORGOTTEN DOG LAS VEGAS
7459 THORNSBY CT LAS VEGAS, NV 89120
(702)339-0399 (503)508-4520
WWW.THEFORGOTTENDOG.ORG
THEFORGOTTENDOGLV@GMAIL.COM
501©(3) NON-PROFIT ORGANIZATION