



## FOSTER PET PROGRAM APPLICATION

*Thank you for your interest in providing a foster home for our rescue pets. Being a foster-based rescue group, foster homes are vital to our success. With dedicated people like you, we can have save more pets' lives and for that, we thank you!*

Name: \_\_\_\_\_

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

City: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Reference Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Reference Name: \_\_\_\_\_ Phone: \_\_\_\_\_

For the safety of our rescue pets, may we complete a background check? \_\_\_\_ Yes \_\_\_\_ No

Are you willing to let us do a home check prior to accepting you as a Foster?\* \_\_\_\_ Yes \_\_\_\_ No

*\*The Department of Agriculture requires a yearly home check with a checklist and they may have access to any part of your home where pets are kept in the event they are investigating a complaint regarding your foster Pet.*

What type of rescue pets can you assist with?

\_\_\_\_ Medical Needs \_\_\_\_ Seniors \_\_\_\_ Behavioral/Socialization Issues \_\_\_\_ Puppies

\_\_\_\_ Cats \_\_\_\_ Kittens

Do you have previous fostering experience? \_\_\_\_ Yes \_\_\_\_ No

If yes, when and with what group? \_\_\_\_\_

Do you currently have other pets in your home?\* \_\_\_\_ Yes \_\_\_\_ No

If yes, list the type, breed and age of each pet:

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*\*Regardless of any local ordinances regarding the number of allowable pets, the Department of Agriculture will allow no more than eight dogs or cats to be housed in any foster home at any time. A female dog with puppies under 8 weeks of age or a queen with kittens under 8 weeks of age will be considered one adult. This limitation of eight cats or dogs includes the Foster's owned pets as well as foster pets.*

Are your pets spayed or neutered? \_\_\_\_ Yes \_\_\_\_ No

Are your pets current on their vaccinations? \_\_\_\_ Yes \_\_\_\_ No

Do your current pets have any behavioral issues? \_\_\_\_ Yes \_\_\_\_ No

If yes, please explain:

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Do your current pets have any illnesses? \_\_\_\_ Yes \_\_\_\_ No

If yes, please explain:

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If you do not have any current pets in your home, have you had pets in the past? \_\_\_\_ Yes \_\_\_\_ No

If yes, please explain why they are no longer in your home

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Are there children living in your home? \_\_\_\_ Yes \_\_\_\_ No

If yes, what are their ages? \_\_\_\_\_

Do you \_\_\_\_ Own \_\_\_\_ Rent \_\_\_\_ House \_\_\_\_ Apartment

*\*If renting, it is your responsibility to verify authorization and breed/size restrictions with your landlord prior to fostering our rescue pets. In addition, the Department of Agriculture requires fosters to state they understand and agree to adhere to all relevant zoning and animal control codes and ordinances, whether local, county or state, so it is your responsibility to verify the same prior to becoming a foster.*

Do you have a fenced yard? \_\_\_\_ Yes \_\_\_\_ No

Height and type of fence: \_\_\_\_\_

How long will the foster pet(s) be left alone? \_\_\_\_\_

Where will you keep the foster pet(s) when you are not home? \_\_\_\_\_

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Where will you keep the foster pet(s) at night? \_\_\_\_\_

What type of exercise will you provide for the foster pet(s)? \_\_\_\_\_

Are you willing to administer medication if needed and keep a record\*? \_\_\_\_ Yes \_\_\_\_ No

*\*The Department of Agriculture requires treatment records be kept on all pet animals that receive any medications or immunizations used in the treatment of prevention of illness, or the treatment of injury, while in the care of a foster. These records must include the identification of the pet receiving medical treatment, signs of illness, reason for treatment, or veterinary diagnosis, the name of the medication or immunization used, the amount of medication used and the time and date on which the medication or immunization was administered.*

If medical attention is necessary, are you willing to transport the foster pet(s) for veterinarian visits? Are you willing to only use veterinarians approved by DDWR?

Special Concerns: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I affirm that the information provided is true and accurate to the best of my knowledge and belief. I understand that any misrepresentation may be grounds for terminating me from DDWR's foster program if this application is accepted. I understand that my application may be denied for any reason or no reason.

Foster Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Home check completed and FOSTER APPLICATION APPROVED: \_\_\_\_\_

Rescue Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## FOSTER HOME INSPECTION FORM

Date of Inspection: \_\_\_\_\_  
Name of Foster: \_\_\_\_\_  
Address: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_  
Work phone: \_\_\_\_\_ Email: \_\_\_\_\_

Number and species of pet animals that permanently reside in home: **dogs** \_\_ **cats** \_\_ (no more than 8 dogs or cats in any foster home allowed; puppies and kittens under 8 weeks with mother count as 1)

### House and Yard

Type of residence: Rent or own: \_\_\_\_\_  
If renting, name of landlord: Phone number: \_\_\_\_\_  
Type of heating and cooling: \_\_\_\_\_  
Overall cleanliness of home: \_\_\_\_\_  
Condition of yard: \_\_\_\_\_  
Type and height of fence: \_\_\_\_\_  
Is the fence sturdy and secure: \_\_\_\_\_  
Is the yard adequate size for dogs: \_\_\_\_\_  
If no yard or inadequate size, does the foster family agree to walk the dog daily: \_\_\_\_\_

### Family and Pets

Are all family members in agreement to foster: Yes \_\_\_\_ No \_\_\_\_  
Children residing in home? Yes \_\_\_\_ No \_\_\_\_  
Is there adequate supervision of children around pets: Yes \_\_\_\_ No \_\_\_\_  
Are the pets in the home good with other pets: Yes \_\_\_\_ No \_\_\_\_  
Are the resident pets spayed/neutered and current on their vaccinations (Rabies, Dhpp and Bordetella): Yes \_\_\_\_ No \_\_\_\_  
Do the pets in the home have any health conditions: Yes \_\_\_\_ No \_\_\_\_  
Do the pets appear clean and well taken care of: Yes \_\_\_\_ No \_\_\_\_  
Condition of food and water bowls: \_\_\_\_\_  
General Comments: \_\_\_\_\_

Inspection Completed

By: \_\_\_\_\_

Signature of Foster: \_\_\_\_\_



## FOSTER AGREEMENT

Doggy Dog World Rescue's (hereinafter referred to as "Rescue" or "DDWR") first and foremost concern is for each and every animal's wellbeing. We must insure every animal's individual needs are met and will take action at our discretion to ensure its foster home meets his/her needs. We understand that every animal is different and so are their individual needs. We need your help in communicating any behavioral problems, changes or concerns etc.

The parties agree that the foster shall abide by the following terms and conditions:

1. \_\_\_\_\_ I understand that by voluntarily signing this agreement, I am entering into a legal and binding contract with Rescue. I understand that any misrepresentations in my application or this agreement are cause for Rescue to declare this agreement in breach.

2. \_\_\_\_\_ I (hereinafter referred to as "Foster") agree to execute a Foster Pet Placement Acknowledgement for each foster Pet DDWR places in my care, hereinafter referred to as "Pet" with the understanding that Foster will provide temporary shelter and care for Pet who currently has nowhere else to live. I agree that this agreement will apply to any and all subsequent foster Pets that are transferred to my care. Rescue will continue to look for a permanent home for Pet, but fostering keeps Pet safe, and provides comfort and security, until he/she can be adopted. I understand that I will not be compensated for this service, other than being provided the essential items and veterinary care needed while Pet is in Foster's care subject to the provisions below.

3. \_\_\_\_\_ Pet's known background and medical history have been discussed with me. I understand that Rescue has made no representation concerning the health, condition, training, behavior, or temperament of the Pet. I acknowledge that the Pet is placed with me "as is" and that no implied or expressed warranties have been made by DCCR in reference to breed, health, training or temperament of Pet. I understand that any description of breed is a guess and I have been advised to have DNA testing done at my expense prior to placement of Pet if there is a question about whether breed restrictions apply to Pet.

4. \_\_\_\_\_ I will be professional and respectful in my dealings with Rescue and with the general public. If at any time should I wish to withdraw from this program, I will provide the rescue with 72 hours' notice to transfer Pet to another foster home. If a Pet is not adapting in my home I will notify Rescue so Rescue can arrange another foster home. I will transport Pet to Rescue at an

agreed upon location or to the replacement foster home.

5. \_\_\_\_\_ I agree to contact Rescue immediately in the case of: aggression, emergencies (Foster or Pet related), medical issues or a lost foster animal.

6. \_\_\_\_\_ I agree to update my information with Rescue accordingly regarding: new animals in the home, new children in the home, moving, personal information changes, vacations, etc.

7. \_\_\_\_\_ I understand and agree to adhere to all relevant zoning and animal control codes and ordinances, whether local, county or state statutes regarding possession of Pet. If I am charged with violating any such ordinance or statute while in possession of Pet, I understand that Rescue is not responsible for obtaining legal counsel for me or for paying any fines or penalties assessed. I will notify Rescue immediately if I am advised that I may be in violation of any animal control or zoning ordinances.

8. \_\_\_\_\_ I understand that regardless of animal control ordinances or zoning, no more than eight dogs or cats may be housed in any foster home at any time. A female dog with puppies under 8 weeks of age or a queen with kittens under 8 weeks of age will be considered one adult. I understand this limitation of eight cats or dogs includes my own pets as well as foster pets.

9. \_\_\_\_\_ I understand and agree that Pet is the property of Rescue. I do not have any ownership of Pet; all such rights remain fully with Rescue while Pet is in my care. Pet shall not be sold, given to, placed in the care of, offered or delivered for adoption to another person, organization or any other entity including, but not limited to, a family member, friend, rescue facility, research facility, or shelter. Pet must be returned to Rescue if, for any reason, Foster can no longer care for Pet.

10. \_\_\_\_\_ I understand that Rescue reserves the right at any time for any reason to request that Pet be returned to the Rescue. If this request is not met within 24 hours, I understand the appropriate legal authorities will be contacted, and legal action may be taken against me to recover possession of Pet. Rescue may show this agreement to any law enforcement agency as proof that I do not own Pet and law enforcement may cite me with theft for refusing to return Pet to Rescue.

11. \_\_\_\_\_ I agree to follow and abide by all of DDWR's rules, regulations, recommendations and policies.

12. \_\_\_\_\_ I agree to provide Pet with a calm, loving, healthy environment and will use only positive reinforcement techniques in training and correcting behavior. Pet will be treated as a family member with loving care and affection. I will do my best to ensure Pet's safety and well being.

13. \_\_\_\_\_ I understand and agree that the name of Pet may not, under any circumstances, be changed. Name may only be changed by an Adopter after successful completion of screening and the execution of an Adoption Contract. Foster agrees that Pet will be called by the name included in this document at all times.

14. \_\_\_\_ I understand that the Rescue will provide me with food, toys, crates, pee pads or any other items it deems necessary to properly care for Pet. I will notify Rescue when I need more items. I understand I will not be reimbursed for items that I purchase myself.

15. \_\_\_\_ I understand and agree that ANY non-emergency veterinary care for Pet must be approved PRIOR TO charges being incurred. Rescue can be contacted for authorization by email or text, phone call to Shelley Osgood, 720-280-6979. All veterinary authorizations must be made by an authorized agent of Rescue; no other individual is authorized to make authorization for any veterinary care. I agree to bring Pet to a veterinarian of Rescue's choosing. I agree to abide by the decision of Rescue in regards to authorizing any medical care for Pet, including the denial of such authorization. Should I not get a reply to email, call or voicemail within 24 hours, I will contact Rescue again as both means of communication can be affected by forces not under Rescue's control.

16. \_\_\_\_ In the event of a life or death emergency, Pet is to be immediately treated and Rescue is to be notified as soon as possible or within 24 hours. If the attending veterinarian feels the condition of or injuries to said Pet are not conducive to reasonable recovery or quality of life for Pet, Pet is to be humanely euthanized. All emergency veterinary records and bills submitted for reimbursement must be in the name of Rescue and reflect the name of Pet as stated in the Foster Pet Placement Acknowledgement. Bills that do not reflect both items will not be reimbursed by Rescue. Foster should take a copy of this contract to the Veterinarian to ensure that all records are in Rescue's name. I understand and agree that any non-emergency veterinary care will not be reimbursed and I will be responsible to pay those charges.

17. \_\_\_\_ I agree to give Pet all required medications or treatments as needed and prescribed by the veterinarian and to accurately log those on a PACFA Animal Medical Record (to be supplied by Rescue).

18. \_\_\_\_ If it is determined that Pet has become ill or injured as a result of my negligent or unreasonable conduct, I will reimburse Rescue for any and all expenses incurred to return the Pet to health or to treat injuries.

19. \_\_\_\_ I agree to take Pet to Rescue adoption events when it is reasonably convenient for me. If I cannot take Pet to adoption events, I may be asked to return the Pet to Rescue.

20. \_\_\_\_ I will feed Pet at least twice a day and provide a fresh supply of water at all times.

21. \_\_\_\_ Pet will live inside my home and will not be isolated from the family. Dogs: I will walk Pet on a leash or exercise Pet in a fenced area. I will never let Pet run loose or roam, keep Pet chained or tied up, keep it continuously in a yard, garage, patio, balcony, or pen, or leave Pet outdoors, even in a fenced yard when no one is at home. Pet may be crated for no longer than (8) hours at a time. The crate must be large enough for Pet to stand up, turn around and lay comfortably on his/her side.

22. \_\_\_\_ Dogs: I understand I may not take Pet to dog parks or play groups until Pet is spayed or neutered and has had all appropriate vaccinations. I understand that Rescue will arrange for spay

or neuter as soon as Pet is healthy or old enough.

23. \_\_\_\_\_ I understand that while Rescue's Pets are typically affectionate and friendly, and Rescue will not place a Pet known to be of an unsound temperament, no one can predict how any Pet will react in a given situation, especially without complete knowledge of its life experiences. Therefore, Foster is strongly urged to exercise prudence and caution in introducing Pet into a new situation (for example dog parks, stores, groomer, vet, other homes and meeting other animals) until Pet has become fully adjusted to its new environment and Foster has had an opportunity to become familiar with Pet's unique personality. Foster accepts all responsibility and liability for all interactions with people and other animals.

24. \_\_\_\_\_ Dogs: I agree that I currently and will always have and maintain a fenced yard at the home where Pet will be or I understand that I must demonstrate to Rescue an ability to properly exercise and keep Pet safe while going to the bathroom. I agree to not allow Pet to ever be allowed to run loose in an unfenced area. I understand Rescue's goal is that Pet is kept as a house Pet in close companionship with its family and it should be in a home where it will be sleeping in the home and not left outdoors. I agree to always give the Rescue's goal priority in considering the Pet's living arrangements.

25. \_\_\_\_\_ I will not use a choke-type collar, prong collar or shock collar at any time.

26. \_\_\_\_\_ I will attach **personal identification tag to a non-choke collar to be worn at all times.**

27. \_\_\_\_\_ In the event Pet becomes lost; I will immediately notify Rescue. I will immediately notify the Rescue of any change of contact information (address, phone number(s), or email address).

28. \_\_\_\_\_ I authorize any animal control agency to release the Pet back to DDWR if Pet is found running at large or is brought to a shelter facility for any reason and agree to reimburse Rescue for any fees paid to get the Pet back. I understand that Rescue may not return Pet to my care if there has been a breach of this agreement.

29. \_\_\_\_\_ Pet's microchip will have Rescue's contact information (address, phone number, or email address). I agree not to remove or alter Rescue's contact information from Pet's microchip. In the event the microchip stops working (backs out after implantation, microchip cannot be found with microchip scanner) I agree to notify Rescue without delay so that a new microchip can be implanted.

30. \_\_\_\_\_ I agree Pet will not be transported in **any** open vehicle.

31. \_\_\_\_\_ I will not abuse or neglect the Pet or allow it to be abused or neglected. I authorize Rescue, at its sole discretion, to determine whether or not Pet has been abused or neglected while in my possession.

32. \_\_\_\_\_ Pet shall not participate or be trained as a guard dog or fighting dog, nor will I use it for



any purpose other than companionship. I will not allow any physical, mental, or emotional abuse of the Pet.

33. \_\_\_\_\_ I affirm that no member of my household has been convicted or charged with any animal welfare law violation such as neglect, cruelty, abandonment, etc. I affirm that no member of my household has been convicted or charged with any domestic battery or sex crime. I will notify Rescue if this changes while I am a foster.

34. \_\_\_\_\_ I am taking possession of Pet at my own risk and I release Rescue, its officers, directors, members, employees, representatives, agents or assigns from any and all liability arising out of possession of Pet. I hereby release Rescue and its officers, directors, agents and representatives and agree to indemnify and hold same harmless from any and all actions, causes of action, suits, debts, dues, accounts, covenants, agreements, judgements, claims and demand of any nature whatsoever arising out of my foster of a Pet from Rescue.

35. \_\_\_\_\_ I acknowledge that Rescue may not be held liable should Pet bite or injure a person or another animal while in my possession. I accept full liability for the Pet while in my care, recognizing the potential issues that may arise with any animal.

36. \_\_\_\_\_ I agree that Rescue will not be held liable for any damage or loss resulting from the failure of Pet to respond to any commands taught to Pet or resulting from counseling advice supplied to Foster. In the event any behavioral concerns arise, Foster will immediately notify Rescue. Should any behavior of Pet result in damage to property, Foster, or another person or animal while in the possession of Foster, Foster agrees to assume full liability to such third party for any and all such damage, and to absolve Rescue from any and all obligations to pay such damage to third party.

37. \_\_\_\_\_ I agree that Rescue shall not be responsible for any bodily injuries or property damage and/or damage to other animals caused by Pet or by the actions of Foster. The Foster hereby specifically assumes sole responsibility for, and agrees to indemnify and hold Rescue harmless from any and all loss and expenses (including legal fees) by reason of liability imposed by law upon the Rescue or any of its officers, directors, members, employees, representatives, agents, or assigns because of bodily injuries or death to any person or persons including Foster or those in Foster's household, or any damage to property and/or animals arising out of or in consequence of the placement of Pet howsoever such injuries, death or damage to property and/or animals may be caused, whether or not the same may have been caused, or may be alleged to have been caused, by negligence of the aforementioned parties or any of their directors, members, employees, representatives, agents, or assigns or any other person.

38. \_\_\_\_\_ I acknowledge and agree that animal bites or other injuries to humans and other animals do occur and that all animals can carry and transmit parasites, diseases, including zoonotic diseases that can be transferred from animals to humans. I understand that Rescue will not be responsible for the transmission or transfer of any disease or parasite to other animals or people in the fostering household and no attempt will be made by me or anyone on my behalf to hold Rescue responsible.

39. \_\_\_\_\_ I acknowledge that breach of this agreement may result in travel costs, court costs and attorney fees payable by me if legal action or travel is necessary for Rescue to recover Pet. I

understands that Pet has intrinsic value and is not replaceable, so if Pet is euthanized, lost or otherwise unable to be returned to the Rescue, I may be found in breach of this agreement and will be subject to pay liquidated damages to the Rescue in the amount of \$2,500.00 in addition to all attorney's fees and costs and actual damages incurred as a result of the breach.

40. \_\_\_\_\_ I agree that any legal action pertaining to this agreement shall be heard in Douglas County Court (or its small claims division), Colorado. In the event Rescue has to file a replevin action to recover possession of Pet, I voluntarily waive my right to attend a show cause hearing under Colorado Rule of Civil Procedure 411 and agree that the Court has the authority to issue a pre-judgement order of possession of Pet to the Rescue without the necessity of posting a bond.

Foster Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Rescue Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## FOSTER PET PLACEMENT ACKNOWLEDGEMENT

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

ANIMAL'S NAME: \_\_\_\_\_

TYPE OF ANIMAL: Canine/Feline

Breed: \_\_\_\_\_

Sex: \_\_\_\_\_

Weight: \_\_\_\_\_

Description: \_\_\_\_\_

Age: \_\_\_\_\_

Microchip ID: \_\_\_\_\_

1. \_\_\_\_\_ The above named animal, hereinafter referred to as "Pet", is being transferred to me, hereinafter referred to as "Foster", with the understanding that Foster will provide temporary shelter and care for Pet who currently has nowhere else to live. I understand that I will not be compensated for this service, other than being provided the essential items and veterinary care needed while Pet is in Foster's care subject to the provisions in the Foster Pet Agreement.

2. \_\_\_\_\_ I understand that all the terms and conditions of the Foster Pet Agreement I entered into with DCCR will apply to this animal, including the following terms that are repeated here for emphasis.

3. \_\_\_\_\_ I understand and agree that Pet is the property of Rescue. I do not have any ownership of Pet; all such rights remain fully with Rescue while Pet is in my care. Pet shall not be sold, given to, placed in the care of, offered or delivered for adoption to another person, organization or any other entity including, but not limited to, a family member, friend, rescue facility, research facility, or shelter. Pet must be returned to Rescue if, for any reason, Foster can no longer care for Pet.

Foster Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Rescue Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## ANIMAL MEDICAL RECORD FOR PRESCRIPTION MEDICATIONS AND IMMUNIZATIONS

Date \_\_\_\_\_ Facility \_\_\_\_\_

Facility ID \_\_\_\_\_

Name of Pet \_\_\_\_\_

Pet ID \_\_\_\_\_

Breed \_\_\_\_\_

Sex Male \_\_\_\_\_ Female \_\_\_\_\_ Neutered \_\_\_\_\_

Color \_\_\_\_\_

Age/Date of Birth \_\_\_\_\_

Clinical Signs \_\_\_\_\_

Veterinary Diagnosis \_\_\_\_\_

Medications Prescribed \_\_\_\_\_

Dosage \_\_\_\_\_

### Administration of Medication

Date	Drug Administered	Dose Administered	Time AM	Time PM	Initials

