



3410 Guerneville Road
Santa Rosa, CA 95401
707.542.5582
www.countrysiderescue.com
Tax ID #51-0544807

Countryside Rescue is a
501 (c) 3 non-profit rescue
and adoption center

FOSTER TO ADOPT AGREEMENT

Date: _____

Foster Animal: _____

Name: _____ Phone: _____

Address: _____ City/State: _____ Zip: _____

Occupation: _____

Email Address: _____

Emergency Contact / Phone: _____

How did you hear about us: _____

I have completed the Dog Adoption Application and have been approved by a Countryside Rescue Representative. _____

Terms & Conditions: I agree to the following terms regarding my participation as a Foster Parent for Countryside Rescue: {Please initial next to each statement}

1. Subject to the remainder of the terms set forth, I agree to provide a temporary home for the above-named animal for the agreed upon foster period. All identification tags will remain on the foster animal for the entire foster period. I understand that I am responsible for providing daily food, water, exercise, shelter, and affection for my foster animal, all at my own expense. _____

2. As the foster parent, I understand I have first choice to adopt my foster animal. If I choose to do so, I will alert CR to begin the adoption process. I understand that if I do not alert CR of my desire to adopt, the foster animal is considered available for adopters and will be required to attend events and be available for potential adopters to meet. Once an adoption is in process, I will be unable to adopt my foster animal. I agree to surrender my foster animal upon notification that an adoption has been approved. _____



3410 Guerneville Road
Santa Rosa, CA 95401
707.542.5582
www.countrysiderescue.com
Tax ID #51-0544807

Countryside Rescue is a
501 (c) 3 non-profit rescue
and adoption center

3. In case of a medical emergency, I will contact Countryside Rescue and will obtain immediate care at the clinic approved by CR. The medical fees will be paid for by CR. I, as the Foster Parent, am responsible to get the medical records to CR within 48 hours of treatment. If I do not attempt to contact CR and take my foster animal to any vet, I am responsible for the medical bills. _____

Puppy Care

- A. I understand my foster puppy cannot be exposed to public elements, such as, sidewalks, dog parks, pet stores, the malls and un-vaccinated dogs, until the puppy is 17 weeks old, which is one week following the last vaccine injection. If I need to take the puppy off my property, it will stay in a crate or if able, I will carry it. _____
- B. I understand, I must wait 1 week from the date of final vaccine before he/she can then walk on public sidewalks, parks, stores etc. _____
- C. I will not take the puppy out of the county to travel without authorization from a CR representative. _____
- D. If the puppy is taking medication, I agree to continue until completed. _____
- E. If I am taking home an animal that has not yet been fixed, it is my responsibility to make sure it is under complete supervision when playing with other dogs. _____
- F. If the animal I am fostering has not yet received its rabies vaccine and is over 4 months old, it is my responsibility to attend a clinic to have the vaccine administered. I will provide CR with proof within 7 days. _____

I understand and agree to the above listed terms of puppy care which pertain to my foster dog. _____

Adult Dog Care

- A. I will not take the dog out of the county to travel without authorization from a CR representative. _____
- B. If the dog is taking medication, I agree to continue until completed. _____

I understand and agree to the above listed terms of care which pertain to my foster dog. _____

4. CR provides on-going support for all our dogs. If you are having behavior problems, please contact us and we will ask our trainer to contact you. He will evaluate the dog and suggest possible solutions._____



3410 Guerneville Road
Santa Rosa, CA 95401
707.542.5582
www.countrysiderescue.com
Tax ID #51-0544807

Countryside Rescue is a
501 (c) 3 non-profit rescue
and adoption center

5. I understand that foster animals often have unknown medical and behavior histories and may show behaviors in one home they may not show in another home. I agree to work through these issues to the best of my ability. If concerns are beyond my ability, if I need to return the foster animal before the end of the agreed upon foster period, I will contact CR. _____
6. Dogs should be allowed indoor/outdoor access and must have a secure fenced area when outside, including shelter from the elements and plenty of water available. California state law prohibits dogs from being tethered in any way for any period of time. The foster animal will always be under my control either on leash or in the confines of my property. _____
7. I will not allow others to care for my foster dog unless I have received approval from CR. I am responsible for the well-being of my foster dog at all times. _____
8. I understand I must bring my foster dog to all adoption events. I will transport my foster to and from events._____
9. I understand the responsibility of a foster is to feature my foster dog for adoption in my own neighborhood and with family and friends. I will set up meet and greets as requested by CR and be available to answer any questions regarding my foster dog. _____
10. By signing this agreement, I consent to a home check by a CR representative prior to taking the foster dog home, as well as, random home checks throughout the foster period. _____
- 11 I understand my foster dog is owned by CR and can be removed from my home at any time in sole discretion, for any reason or no reason. I agree to surrender my foster dog to CR upon receiving notification of termination of the foster agreement. _____
12. I understand that any animal, including the foster dog may pose a risk of injury, death, illness or damage to myself, my family, other persons or personal property. I voluntarily and knowingly assume any and all risks associated with my agreement of illness or damage. _____



3410 Guerneville Road
Santa Rosa, CA 95401
707.542.5582
www.countrysiderescue.com
Tax ID #51-0544807

Countryside Rescue is a
501 (c) 3 non-profit rescue
and adoption center

13. I hereby waive and release CR, its board members, director, officers, employees, agents, contractors, and volunteers from any claims, causes of action or liability for any injury, illness, or damage to self, other persons, or property once the animal is in my foster care. _____

14. I have read the Release Agreement and fully understand that I will relinquish all claims or actions known now or in the future against CR., its board members, director, officers, employees, agents, contractors, and volunteers. I am of legal age and legally competent to sign this agreement. I am signing this agreement of my own free will without the influence of a CR staff member. It is expressly understood and agreed that I am hereby waiving and surrendering my rights pursuant to Section 1542 of the Civil Code of the State of California. _____

I understand and agree to the above terms and conditions. Yes No

By signing below, I acknowledge that the information provided on this agreement is correct. If at any time the information I have provided changes, I will provide the updated information to CR.

Print Name: _____

Signature: _____ Date: _____

Countryside Rescue Rep: _____

Signature: _____ Date: _____

If you have any questions regarding your foster animal, please contact one of our staff members and the numbers or email address below.

Amanda Parks - 707-888-8155

countrysiderescuesr@gmail.com

Nancy Dami - 707-974-8451

office: 707-542-5582

Kim Johnson - 707-230-0132