



STOLA

Saluki Tree of Life Alliance

3701 Sacramento Street #345, San Francisco, CA 94118-1705

E-mail: stola@gazehound.com • Web: www.stola.org

An IRS 501(c)(3) nonprofit charity.

FOSTER CARE AGREEMENT

This agreement is between _____, hereinafter called “foster care giver” and STOLA-Saluki Tree of Life Alliance, hereinafter called “STOLA”. I, the foster care giver agree to assume responsibility for all dogs placed in my care by STOLA. I agree to the following terms regarding all dogs placed in my care.

1. I agree never to abuse or allow anyone in my charge to abuse a dog in my care. The term “abuse” used herein shall mean physical aggression, the withholding of food, water or shelter, and/or emotional neglect.
2. I agree not to undertake any surgical or other medical procedures without the written consent of STOLA unless such medical or surgical procedures are undertaken during an emergency situation which may be life threatening to the dog.
3. I agree to provide a loving environment including a balanced diet and in-house sleeping privileges or a kennel facility appropriate to the weather conditions of the area.. This means that the dog will be provided with suitable shade as needed and protection from the elements.
4. I agree to never transport or allow anyone else to transport this animal in the open back of any truck or pickup. When transporting for any reason, this animal will be properly leashed or crated within the confines of the auto, with adequate ventilation, and will never be left unattended.
5. I agree never to let the Saluki be off-leash unless in an area unless it is completely fenced, or safely free of traffic.
6. I agree to keep identification tags on this animal at all times.
7. I agree that this animal will not be bred, nor fought, nor used for guard or attack purposes.
8. I understand that this animal is the legal property of STOLA. I will not sell or give this animal to any other person, company, organization, medical research facility, pound or animal shelter. Furthermore, I will not, for any reason, temporarily or permanently surrender the physical possession of this animal to any person or business entity unless prior written consent is received from STOLA.

8. If my address, telephone number or email address change, I agree to notify STOLA immediately.

9. If, at an time while under my foster care I am unable to keep this dog, I agree to return the dog to STOLA after contacting either the address at the top of this form, or the Regional Coordinator.

10. I accept the position of foster care giver as a volunteer. I do not expect, nor will I receive, compensation for this position, beyond reimbursement for expenses directly incurred in caring for the dogs placed in my care by STOLA. I agree to submit receipts to STOLA for expenses for which I will claim reimbursement from STOLA.

11. I accept possession of this animal at my own risk, and hereby release STOLA and its agents, volunteers, foster care givers and representatives of all liability for any damages to person or property caused by this animal and/or from its sickness and/or death.

12. I agree to immediately surrender the animal to a STOLA representative should it be determined in the sole discretion of STOLA that I am in violation of any of the above terms of this agreement.

STOLA, by way of its Volunteers and Regional Coordinators as listed below, agrees to do all investigations and preparation necessary for placement of this animal, and agrees to cooperate with the foster care giver with respect to visits by prospective adoptive families, if necessary.

STOLA agrees to pay for pre-approved medical costs at veterinarians approved by STOLA Regional coordinators incurred while under foster care.

This agreement shall be construed under the laws of, and enforced only in the courts of, the State of California.

In signing this agreement, the signer or signers of this document agree to its terms and shall reimburse to STOLA-Saluki Tree of Life Alliance the reasonable legal fees and costs associated with any legal action necessary to enforce this agreement.

I have read the above agreement and understand and agree to the terms and conditions herein stated.

Name of Foster care giver(s): (print) _____

Signature: _____

Date: _____

Address: _____

Residence Telephone _____ Business Telephone _____

E-Mail Address: _____

STOLA - Saluki Tree of Life Alliance

Signed by: _____

Name (print):

Regional Coordinator

Detailed Information on Dog Being Placed in Foster Care:

Name of Dog:

Dog's Code Number:

Sex:

Age:

Altered (yes/no)

Color/Markings:

Smooth:

Feathered:

Tattoo:

Microchip:

AKC Registration #:

Vaccinations (give dates)

Date Given

Date Due

Rabies:

Lyme:

DHLPP

Bordatella

Heartworm Medication

Other

Regional Coordinator Contact Information:

Name:

E-mail address:

Telephone: