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Foster Application and Contract

Second Chance Animal Rescue of Littleton, NH is a non-profit charitable organization funded primarily through donations. Our mission is to rescue, nurture and find loving, permanent homes for abused and abandoned cats, the prevention of cruelty to animals and the education of current and potential pet owners about responsible ownership.

Date of Application: _____

Name _____ Date of birth _____

Preferred name (if different) _____

Physical address _____

Mailing Address _____

City, State, Zip _____

Phone (Home) _____ (Work) _____

(Cell) _____ e-mail _____

Number of adults in home _____ Ages of children in home _____

Is anyone allergic to cats? _____

Is everyone in the home supportive of your decision to foster and agree to follow the policies and guidelines as stated in this document? _____

of cats in home _____ #of dogs in home _____ other animals _____

Are your pets up to date on shots (incl. distemper)? _____

Are they spay/neutered? _____ Are the cats indoor _____ indoor/outdoor _____ outdoor _____

Have your cats been FeLV/FIV tested? _____ Results _____

Name, town, phone # of your veterinarian _____

Do you: own___ rent___ Live in a: house___ apartment___ condo/town home___ mobile home___

If you rent: Landlord's name_____ Phone (____) _____

Does the lease allow pets and are you authorized to bring additional pets into the home?_____

Do you have a room in which your foster(s) can be separated from other pets?_____

What kind of experience do you have caring for cats (incl. experience giving meds, socializing, etc.)

Do you have any physical restrictions?_____

Have you been or are you currently involved with another rescue group or humane organization?

Are you able to cover the cat's veterinary expenses during your foster commitment?_____

Would you like to be provided litter?_____ Food?_____

What brand of cat food do you currently use?_____

For what length of time can you foster a cat/kitten?_____

How many cats are you able to foster at one time?_____

Which of the following are you willing to foster? (preferences can be indicated in order from 1-7)

Pregnant cat_____

Mom cat/kittens_____

Abandoned kitten(s)_____

Adult cat_____

Older cat_____

FIV cat_____

Special needs cat_____

Are you able to transport the cat in a sturdy carrier for adoption events and to the vet as needed?_____

Would you allow potential adopters to come to your home to see the cat?_____

Date of your last Tetanus shot_____

Do you acknowledge that Second Chance Animal Rescue has informed you of their guidelines and policies (as stated below), and state and city regulations regarding housing of animals?

Yes_____ No_____

Please read the following statements and initial if you agree to comply:

I understand that Second Chance Animal Rescue retains ownership of all cats and kittens in foster care, and reserves the right to reclaim a cat and terminate foster if they feel it is in the best interest of the cat _____

I understand that I will be expected to keep the cat/kitten secure and indoors only, return it to Second Chance Animal Rescue when requested to do so, and not promise the animal to anyone or imply that I have authority to approve a potential adoption _____

I understand that all adoption and medical decisions regarding the foster cat or kitten in my care will be made by Second Chance Animal Rescue_____

I understand that I will pay any just and reasonable amount to cover costs and expenses accrued by Second Chance Animal Rescue in securing the safe return of a foster cat or kitten that was in my care if it is determined I gave or adopted it to someone without prior approval_____

I understand that all veterinary visits must be to vets that are endorsed by Second Chance Animal Rescue and must be approved in advance by the Shelter Manager or Board President. Likewise, all medical expenses must be authorized for payment in advance _____

Please read and sign the following:

I have read and understand all the statements above. I declare that the information given is true and correct and agree that, if any false information has been provided, it may nullify my foster care contract with Second Chance Animal Rescue and I will arrange for the return of all foster cats/kittens in my care. Further, I understand that although Second Chance Animal Rescue takes reasonable care to screen cats/kittens for foster care placement, it makes no guarantee relating to the health, behavior, or actions of the cats/kittens. I understand that I receive foster cats/kittens at my own risk and can refuse to foster or return any cats or kittens for Second Chance Animal Rescue has asked to me to provide care (allowing the Shelter Manager a reasonable amount of time to secure another placement). I acknowledge that Second Chance Animal rescue is not responsible for any property damage or personal injury suffered by me, members of my household, or third parties during a foster placement, and I assume liability to provide adequate controls to prevent such damage or injury.

Foster caretaker Date_____

SCAR representative Date_____

Second Chance Animal Rescue Volunteer Waiver

I agree that on behalf of myself, my heirs, personal representatives and executors, I release, discharge, indemnify, and hold harmless the Second Chance Animal Rescue, its agents, employees, directors and board of directors from any and all claims, causes of action, or demands of any nature of cause, including costs and attorney fees incurred by Second Chance Animal Rescue in connection with the same, based on damages or injuries which may be incurred or sustained by me in any way connected with my services for Second Chance Animal Rescue including but not limited to animal bites, accidents, illnesses, or injuries.

Printed Name

Signature

Date _____

NOTE: Second Chance Animal Rescue strongly recommends foster caretakers be up to date on Tetanus