New Albany Floyd Co Animal Control & Shelter Foster Care Agreement

, agree to	the following. Please initial each section.
will allow inspection of the a fostering of all animals if requesters.	animal care area at my place of residence prior to and during the
2I will provide all basic care ite	ems (such as food and litter) at my own expense.
3I will provide daily exercise a	nd adequate shelter.
	als are to be kept separate from my pets. I understand that the I Control & Shelter cannot treat my pets if they become ill or shelter animal(s).
WILL CONTACT the New Albany	er care of this animal(s) I feel that veterinary care is required I Floyd County Animal Control & Shelter so arrangements can ce. In case of emergency after business hours I will contact act list provided.
	at become ill while in foster care will be evaluated as if they hay result in a decision to euthanize.
	New Albany Floyd County Animal Control & Shelter upon to relinquish possession of the the animal.
	ceedings for these animals. I will refer all interested parties to I Control & Shelter for adoption information.
I understand that the rights to New Albany Floyd County Anima	these animals, and their final disposition, remains with the Control & Shelter.
Animal Control & Shelter. At no ti	s in my care are the property of the New Albany Floyd County me may I give away, sell, or keep these animals. I understand s that I am fostering constitutes theft and will be reported to the
for damages caused by the anima	y Floyd County Animal Control & Shelter assumes no liability al(s) while in my custody. New Albany Floyd County Animal ole for determining the temperament or other characteristics of
and indemnify New Albany Floyd	anger inherent in handling animals and I agree to hold harmless County Animal Control & Shelter from any injuries or loss may be caused by the animal(s) I am fostering.
13If I wish to adopt a foster anir Shelter guidelines and pay the re-	mal I will follow the New Albany Floyd County Animal Control & quired fees.
14. Volunteer Signature	Date
Witness Signature	Date