



2305 Southern Dr Virginia MN 55792 218.741.7425  
**Foster Care Agreement**

The parties hereto agree as follows: The foster caretaker (“the caretaker” or “you”) signing below hereby acknowledges receipt from Mesabi Humane Society (“MHS,” “we” or “us”) of the animal(s) described below for foster care. In accepting this (these) animal(s), and in consideration for being entrusted with the care, custody and possession of the animal(s), you agree to be bound by the covenants and conditions stated below.

Foster Care Personal Information

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Animal(s) Received

Intake number and name: \_\_\_\_\_

Breed/Sex/Age: \_\_\_\_\_

Medications/Vaccinations received: \_\_\_\_\_

The parties agree that:

1. The Foster Care. The caretaker shall provide the animal(s) with good care in their home, including but not limited to: food, water, shelter, outdoor exercise, socializing and playing, transportation to a vet or adoption event, grooming, training, bottle feeding and medication when required. You are providing foster care out of your love for animals, and as a volunteer, at no charge to MHS.
2. Ownership. As between the caregiver and MHS the animal(s) shall remain the sole property of MHS.
3. Returning foster animal(s). The animal(s) shall be returned to MHS upon request by either organization, if you are no longer able to adequately care for the animal(s), or if you are relocating outside of the MHS area.
4. Inspection. Agents of MHS will be allowed to inspect the premises in which the animal(s) will be maintained or are maintained, from time to time, for the purpose of determining the suitability of those premises for the care and maintenance of the animal(s).
5. Placement of animal(s). The foster caretaker understands and acknowledges that s/he does not have any right or authority to keep the foster animal(s) or to place the foster animal(s) in other homes or places with other individuals unless permission is given by the MHS Shelter Manager.



2305 Southern Dr Virginia MN 55792 218.741.7425

6. Costs and Expenses. MHS will provide initial vaccinations and medications for minor existing ailments, and will provide dog/cat food and cat litter to the foster caretaker for use by the fostered animal(s). We will pay for all vet treatment costs that may be incurred for the animal(s) during foster care, provided that we have given you prior approval for such treatments. In the case of a medical emergency, you agree to contact the Volunteer Foster Care Coordinator or MHS Shelter Manager for prior approval before treatment is rendered. You agree to give us the receipts from the vet for vet care and medications. You agree to use Northland Animal Hospital or Critter Care Vet Clinic for vet care of your foster animal(s). The foster caretaker agrees that, should the animal(s) require extensive medical treatment, MHS may request immediate return of the animal(s) and may euthanize the animal(s) for humane reasons.
7. Adoption by caretaker. In the event that you wish to adopt any or all of the animal(s) as a household pet for yourself, you must first enter into an Adoption Agreement.
8. No Liability. The foster caretaker is not liable to MHS for any injuries, illnesses or disappearances of the animal(s) arising out of foster care, except if such injuries, illnesses or disappearances are caused by or arise out of your gross negligence or intentional misconduct. MHS is not liable for any bodily injury or property damage, losses or injuries whatsoever to you or other persons, or to you or another person's animals or pets, caused by the actions, behavior or health of the animal(s), or arising out of foster care, except if such damage, losses or injuries are caused by your gross negligence or intentional misconduct.
9. Returning animal(s). The foster caretaker agrees to return said animal(s) to MHS no later than \_\_\_\_\_  
(subject to change if authorized by MHS personnel).

This contract represents the entire agreement between the parties and any modifications will be made in writing and signed by both the foster caretaker and the VFCC or MHS Shelter Manager.

Executed on: \_\_\_\_\_ 20\_\_\_\_

Foster caretaker name: \_\_\_\_\_

Foster caretaker signature: \_\_\_\_\_

MHS agent name: \_\_\_\_\_

MHS agent signature: \_\_\_\_\_

<p><b>Office use:</b></p> <p>Is applicant at least 18 years of age? _____ Own or rent home? _____</p> <p>Does anyone in the family have allergies to animals? _____</p> <p>Ages of children in the home _____</p> <p>Other animals in the home _____</p>
--