

# ANIMAL RELEASE TO FOSTER CARE

The below-described animal has been released from care at the Emergency Animal Shelter and will be transferred and cared for by the below named foster care resident.

**CONTROL ID #** \_\_\_\_\_ **LOCATION/PEN#** \_\_\_\_\_

**ANIMAL DESCRIPTION:** \_\_\_\_\_

**OWNER'S NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**OWNER'S ADDRESS:** \_\_\_\_\_

**MEDICAL TREATMENT PROVIDED TO ANIMAL:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**TREATMENT PROVIDED BY:** \_\_\_\_\_

**NAME OF FOSTER CARETAKER:** \_\_\_\_\_

**HOME ADDRESS:** \_\_\_\_\_

**WORK ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

(Home)

(Work)

(Other)

THE UNDERSIGNED FOSTER CARETAKER HEREBY ACKNOWLEDGES RECEIPT OF THE ABOVE DESCRIBED ANIMAL, AND AGREES TO PROVIDE HUMANE CARE, ADEQUATE SHELTER, AND FOOD TO THIS ANIMAL WHILE IN HIS/HER FOSTER CARE; AND AGREES TO HOLD HARMLESS ALL PERSONS, ORGANIZATIONS, OR GOVERNMENT AGENCIES INVOLVED IN THE RESCUE, CARE, AND SHELTERING OF THIS ANIMAL. THE ANIMAL'S OWNER AGREES TO BE RESPONSIBLE FOR ANY VETERINARIAN, FOOD OR CARE EXPENSES INCURRED DURING THE FOSTER CARE PERIOD.

**FOSTER CARETAKER'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**FOSTER CARETAKER'S PRINT NAME:** \_\_\_\_\_

**OWNER'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**OWNER'S PRINT NAME:** \_\_\_\_\_

**EMERGENCY ANIMAL SHELTER STAFF SIGNATURE:** \_\_\_\_\_

**STAFF PRINT NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**SIGN IN TRIPLICATE.**

COPY TO (circle one):

OWNER

FOSTER CARETAKER

EMERGENCY ANIMAL SHELTER