



Follow Your Heart Animal Rescue

A 501(c)(3) Nonprofit Charitable Organization

Email/PayPal: followyourheartfoundation@gmail.com

Web: www.followyourheartanimalrescue.org

Phone 480-807-0085

FOSTER LIABILITY WAIVER

I/we _____ and _____ understand that all work performed with Follow Your Heart Animal Rescue. (FYH) is voluntary and at my/our own risk, and therefore, release FYH, its director(s), affiliate(s), and representative(s) of any and all public liability, property damages and/or medical costs incurred while I/we are providing fostering services for FYH.

I/we do hereby on behalf of myself/ourselves, heirs, administrators and assigns, irrevocably and unconditionally release and agree to hold harmless FYH, its director(s), affiliate(s), and representative(s) from any and all known or unknown, anticipated or unanticipated, suspected or unsuspected and/or fixed, conditional or contingent actions, causes of action, charges, suits, debts, expenses, including and without limitation, attorney's fees, or damages, including but not limited to any medical costs, damages or property, person(s), or other pet(s) of any kind, nature and description at law or in equity, in connection with or arising from my/our voluntary services performed with FYH.

I/we understand that a home visit is REQUIRED prior to volunteering/fostering, and that Follow Your Heart Animal Rescue may, at its discretion, make follow-up visits to ascertain if my home continues to meet the requirements of a volunteer/foster. Furthermore, FYH may excuse me/us from services at any time, for any reason at all, as my service is voluntary and subject to sole discretion of FYH.

By affixing my signature below, I acknowledge that I have read, understand and agree to ALL of the provisions set forth in this contract and I further agree to abide by all of its terms and provisions, completely.

Signature: _____

Signature: _____

Printed Name: _____

Printed Name: _____

Date: _____

Date: _____

Follow Your Heart Representative - Please leave the section below blank and continue on following page

Signature: _____ Date: _____ Printed Name: _____

Title: _____

Home Visit Scheduled For: _____ (Date/Time)

Home Visit Completed On: _____ (Date/Time)

Home Visit Completed By: _____ (Printed Name)

Signature of FYH Representative: _____

Notes/Comments: _____



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FOSTER APPLICATION

Name: _____ *Facebook Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone #: _____ Driver's License #: _____

I certify that I am at least 18 year of age: YES NO

Preferred Method of Contact: CALL TEXT EMAIL FACEBOOK MESSAGE

Name of Spouse/Significant Other _____ Phone: _____

Why do you want to foster a rescue animal(s)?

Special considerations, request or preferences you have in fostering a rescue animal(s)

Animal(s) will be kept: ___ Inside ___ Outside. Where will animal sleep? _____

When not home, where will animal(s) be kept? _____

Is your back yard fenced? Y N What is height of fence? (5' minimum) ___ 5', ___ 6' ___ 7' Other _____

What type of material? ___ Block ___ Wood ___ Chain Link ___ Wrought Iron Other (Explain): _____

Do you have a doggy door? Y N Do you have a crate? Y N Do you have an exercise pen? Y N

Do you have a swimming pool? Y N Is your pool fenced? Y N Is your gate secured with a lock? Y N

Do you have any dog obedience training experience? _____

Have you had an animal contract parvo in the last 6 months? YES NO

If yes, do you currently reside at the same residence? YES NO

Do you agree to keep current license and I.D. tag(s) on animals always?..... Y N

Do you agree to **NEVER** allow foster animal(s) to ride in the back of an open vehicle un-kenned?..... Y N

Do you agree to obey all leash laws??..... Y N

Do you agree to **NEVER** take foster animal(s) to **ANY** dog parks??..... Y N

Do you agree to **NEVER** allow strange or unknown animal(s) to meet nose to nose with your foster?..... Y N

*Proper introduction procedures are required and **MUST** be followed in order to insure safety of all animal(s) at all times.*

(Fosters will be given information on how to introduce animal(s) properly)



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SUBMIT APPLICATION

FOSTER APPLICATION

How many adults live in your home? _____ Number of children in home? _____

Please list names and ages of all full or part-time residents in home:

Who in household will care for foster animals? _____

List one personal reference who is NOT a family member:

Name: _____ Phone _____ Phone Type: _____

Address: _____ City: _____ State: _____ Zip: _____

Please list all animals that you currently own and/or have in your home (skip section if not applicable):

DOGS # of Dog(s) _____ Gender(s): _____ Age(s): _____ Breed(s): _____

OTHERS # of Cat(s): _____ # of Reptile(s): _____ # of Bird(s): _____ Other(s): _____

Your Veterinarian's Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

I can/will provide proof your pet(s) is/are current on all required vaccinations? **Y** **N**

I can/will provide proof that your pet (s) are spayed/neutered, if required? **Y** **N**

How long have you lived in your current home? _____ Housing Type: _____

Do you Own **OR** Rent your home? If you rent, have you received permission from your landlord? **Y** **N**

Landlord Name: _____ Landlord Phone: _____

I agree that the animal(s) placed in my care is/are the property of Follow Your Heart Animal Rescue, and will be treated as such. I will be responsible for the animal while in my possession. I agree to do no harm to the animal(s) while in my care, and further agree to seek medical attention, when appropriate, if the animal(s) become sick or injured. I agree to contact Follow Your Heart Animal Rescue immediately if the animal requires medical care/attention, or if I am unsure. Additionally, I agree to give any/all medications to the animal(s) while in my care, as necessary and/or required, if the animal(s) is/are being treated under veterinary instruction. I attest that all answers above are true to the best of my knowledge. If any of the information given above is found to be untrue or falsified, I understand that my foster application will be denied, and that I can be removed as a foster at any time either before or after I begin fostering for Follow Your Heart Animal Rescue for any reason. I agree to surrender the animal(s), including any and all property that I may have in my possession belonging to Follow Your Heart Animal Rescue to a FYH representative immediately, upon request. *[VIRTUAL HOME CHECK WILL BE REQUIRED]*

Applicant Signature: _____ Name: _____ Date _____