



Pets Are Worth Saving

www.NevadaPAWS.org



Senior to Senior

Forever Foster Agreement

Adopter's Name: _____ Home # _____ Alt # _____

Address _____

City _____ State _____ Zip _____

Email: _____

Pets Are Worth Saving would like to thank you for Senior to Senior Forever Fostering a P.A.W.S. pet. Please review the following terms carefully and initial after reading.

Animal Name: _____

Description: _____

_____(Initial) I hereby authorize my LOST/FOUND pet to be immediately released to a representative of P.A.W.S. in the event I cannot be reached for immediate reclaim of my pet.

_____(Initial) I agree to provide care for my fostered pet, including, but not limited to, providing (requesting if appropriate) adequate high quality food as well as providing water, a clean shelter within a comfortable temperature range, and obtaining or requesting necessary medical treatment and veterinary care, including needed vaccinations. The dog will be treated as a family member with loving care, affection and respect.

_____(Initial) I agree to keep an identification tag attached to a properly fitted collar which will remain on the dog at all times (cats optional), whether inside or outside the home, and to obtain all licenses required by local authorities. I will abide by all state and local laws regarding animal ownership. Pets should be registered and licensed within your county of residence.

_____(Initial) I agree to have the pet under control when he/she is not within the confines of the property. The pet shall not be chained or tied.

_____(Initial) I agree **NOT** to declaw, debark, crop ears/tail, or otherwise mutilate this dog. I understand that P.A.W.S. cannot guarantee the health, temperament, or training of the pet and hereby **RELEASE** P.A.W.S. from all liability once the pet is in my possession. If a health problem develops within the first month, I will notify P.A.W.S..

_____(Initial) I understand that my new pet will need time to adjust to their new home. This could last a few days or a few weeks. During this time, the pet may exhibit behavior that he/she will not otherwise exhibit after he/she adjusts to their new life. This may include housetraining accident; escape attempts, excessive barking, and chewing among others. I understand a consistent routine will give my adopted pet security and help him/her adjust quicker. I will seek out help with P.A.W.S. volunteers if I require assistance with these issues.

_____(Initial) I will transport this pet safely at all times.

_____(Initial) P.A.W.S. may inquire about or examine the pet at any time. If the examiner is not satisfied with the conditions of the pet and/or this agreement has not been fulfilled, P.A.W.S. may reclaim the pet.

_____(Initial) If the pet becomes lost, I will notify P.A.W.S. within 24 hours. If I fail to make such notification, and P.A.W.S. recovers the pet, the pet may not be returned.

_____(Initial) I understand that this pet is a living being, and further agree that P.A.W.S. can not and will not make any representations or warranties as to this dog's health, physical condition, prior medical history, pre-existing conditions or age, behavior, temperament or training. P.A.W.S. is responsible for ensuring that each animal is altered and up-to-date with rabies and basic vaccines until a home is found.

_____(Initial) If for any reason I cannot keep the pet, I will notify P.A.W.S. and agree to surrender the pet back to P.A.W.S. (contact info provided below). **Under no circumstances will I surrender the pet to ANY public shelter.**

_____(Initial) I hereby release P.A.W.S. from all liability for legal fees, veterinary care expenses or any other expense or liability incurred as a result of this Forever Foster Agreement.

_____(Initial) **Forever Foster would like to make a donation of \$**_____

Signature: _____

Date: _____

P.A.W.S. Representative: _____

P.A.W.S. Contact: Peggy Sanders, phone: (775) 513-9120, Email: pawspeggy@gmail.com