

**PLEASE DOWNLOAD THIS FORM, FILL
IT OUT, AND SCAN BACK TO
ABQCHIHUAHUARESCUE@GMAIL.COM**

**YOU CAN NOT FILL THIS FORM OUT
ONLINE AT THIS TIME.**

**WE APOLOGIZE FOR THE
INCONVENIENCE**



ABQ CHIHUAHUA RESCUE, INC. FOSTER CONTRACT

NAME OF FOSTER VOLUNTEER: _____

Please initial:

_____ I understand a home visit is required prior to my fostering a dog through ABQ Chihuahua Rescue, Inc.

_____ I promise to provide the dog with a good, safe, warm foster home, quality food, clean water, and love.

_____ I understand that the dog has been tested for heartworms and is on heartworm preventative. I agree to continue giving the dog heartworm preventative as directed and provided for by ABQ Chihuahua Rescue, Inc.

_____ I understand that the dog is to live in the house. I agree I will not keep the dog outside except for reasonable periods of time as needed by the dog. The dog will not be allowed to roam nor will the dog be physically restrained to any inanimate object.

_____ I will contact ABQ Chihuahua Rescue, Inc. within two hours if the dog is lost, stolen, or has died.

_____ If I cannot keep the dog or provide appropriate care for any reason, I will immediately contact ABQ Chihuahua Rescue, Inc.

_____ I will comply with all State and local ordinances in the confinement and care of the foster dog. I will keep the ID tags on and maintain the rabies certificate at my home.

_____ I will keep the dog on a leash at all times when walking.

_____ If the dog becomes sick or has a medical issue, I will contact ABQ Chihuahua Rescue, Inc. prior to taking the dog to Good Shepherd Animal Clinic or any other clinic.

_____ I agree to show my foster **two** times per month at a scheduled Meet n' Greet event in order to increase the chance the dog will be adopted.

_____ I agree to make a strong effort to attend the scheduled General Meeting, as these are educational, informative, supportive, and keep us connected as an organization.

_____ I agree to hold harmless ABQ Chihuahua Rescue, Inc. and its volunteers, for any liability or damages, should this dog become a problem to myself or others. I understand this dog's background may or may not be known. ABQ Chihuahua Rescue, Inc. has evaluated the dog's behavior to the best of its abilities and will not be held responsible should the dog prove to be any sort of danger to any other animals, humans, or possessions.

_____ I agree that ABQ Chihuahua Rescue, Inc. representatives may enter property and recover the dog if in the sole opinion of ABQ Chihuahua Rescue, Inc. I have not complied with the terms of this contract.

This section to be completed by the Foster Volunteer.

Date: _____

Print Name of Foster Volunteer: _____

Signature of Dog's Foster Volunteer: _____

Date of Birth _____ Driver's License # _____

Street Address _____

City _____ State _____ Zip Code _____

Primary Phone# _____ Alt. Phone# _____

Email Address _____

This section to be completed by ABQ Chihuahua Rescue, Inc. Volunteer

Date _____

Signature of ACR Volunteer: _____

Home Visit Conducted: Yes _____ No _____ Date of Visit: _____

Notes: _____

Name of dog(s) being fostered by this volunteer and date fostering began and ended:

NAME OF DOG

DATE BEGAN

DATE ENDED
