



P.O. Box 7  
Macomb, IL 61455  
Phone: 309-837-5611

# Humane Society of McDonough County

An Illinois Not-for-Profit and Federal 501(c)3 Organization

Website: [www.hsmcil.org](http://www.hsmcil.org)

Facebook: [www.facebook.com/HSMCIL](http://www.facebook.com/HSMCIL)

Petfinder: [www.petfinder.com/shelters/IL65.html](http://www.petfinder.com/shelters/IL65.html)

Email: [humanesociety.mcil@gmail.com](mailto:humanesociety.mcil@gmail.com)

## Humane Society of McDonough County

### Dog Foster Home Agreement

#### State of IL Department of Agriculture License # 14284

Name of foster parent:

Name of dog:

Address:

Phone #

E-mail:

The foster dog shall hereinafter be referred to as "the dog." The aforementioned person shall hereinafter be referred to as "I" or the "foster parent." Humane Society of McDonough County Inc. shall hereinafter be referred to as "HSMC."

Any dog offered for foster care is the sole property of HSMC and has been surrendered as such by prior owners or animal care facilities. To the best of HSMC's knowledge a foster dog is not the owned property of another person. However, HSMC will not be held liable for any unknown misrepresentations regarding the status of a rescued dog.

The dog's health and behavior has been accurately represented to the foster parent, to the best possible knowledge of HSMC. HSMC cannot, and does not, make any guarantees as to the health, temperament, mental disposition, or training of the dog. HSMC shall not be held liable for any illnesses or defects the dog may have or develop, or for any injury or damage that the dog may cause. The foster parent hereby fosters the dog at his/her own risk.

I agree to foster a dog for Humane Society of McDonough County Inc. for a limited period of time. I understand that I am acting as a temporary custodian of any and all dogs fostered for HSMC, and that HSMC retains sole ownership rights of any dog offered for foster care. I consent to the following terms and conditions of this foster agreement.

#### General Care

- I will care for the dog humanely. The dog will be a household companion and will live in the house. The dog will not be kept outside except for reasonable periods of time, such as for play, exercise, and to go to the bathroom. The dog will never be left outside when I am not home, even if in a fenced yard or on a tie line.
- I will provide the dog with affection, mental stimulation through play and training, socialization, and regular exercise, appropriate to his/her health and physical condition.

- I will provide the dog with a good quality dog food and fresh water, and maintain him/her at a proper weight.
- I will provide the dog with comfortable and clean bedding, and appropriate toys.
- I will advise HSMC when the dog needs to be groomed and arrangements will be made. I will request HSMC's permission to groom the dog myself (other than bathing), or to take the dog to a professional groomer which has been arranged by the HSMC.
- I will always keep the dog on a leash when outside, and will only allow him/her to run loose in a securely fenced yard. I will obey all leash laws.
- I will clean up after the dog in public places, and obey all "pooper-scooper" laws.
- I will never leave the dog without proper care for more than 24 hours.
- I will never leave the dog unsupervised/unattended in any vehicle.
- I will never crate the dog for more than 9 hours at a time, and for never more than 17 hours during a 24 hour period. The dog will not remain solely in a crate while indoors. HSMC will loan the foster a crate for the dog that is suitable. The crate will be returned to HSMC upon adoption/transfer of the dog.
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### Health Care

- I will contact HSMC immediately if the dog becomes ill or injured, and will seek timely veterinary care. I will provide a detailed description of the situation and a number where I can be reached. If my call is not returned within one hour, I will be deemed authorized to proceed with necessary treatment as recommended by Dr. Loop with Animal Medical Center (or another veterinarian if he is unavailable).
- I understand that I will be reimbursed for any illness/condition not resulting from my care, if I provide HSMC with receipts for all services rendered. I understand that I will not be reimbursed for any injury sustained by the dog while in my care due to abuse or negligence.
- I will not have any cosmetic surgery performed on the dog that will alter or change his/her appearance in any way, shape or form (i.e. ear cropping, tail docking, debarking).
- I will never breed the foster dog if he/she has not been spayed or neutered due to age or for health reasons while in my care. I will comply with all of the terms and conditions of the spay/neuter agreement.
- I will not euthanize the dog without the approval/authorization of HSMC. I will notify HSMC immediately upon the death of the dog, and prior to the disposal of the body.

### Behavior and Training

- I will use my best judgment and take all necessary precautions to protect myself when providing daily care and training for the foster dog until I have had sufficient time to become familiar with his/her personality and behavior. I will use my best judgment and take all necessary precautions when first introducing the dog to other members of my household and other family pets, as well as with new people and new situations until the dog has become fully adjusted to my home. I will closely supervise all interaction with children.
- I will provide appropriate and humane behavior modification for behavioral problems including, but not limited to housebreaking accidents and urine marking, chewing, barking, digging, aggression, and biting. I will contact HSMC if the dog exhibits behavioral problems that are beyond my ability to reasonably manage.
- I will never use harsh physical discipline, and will never physically abuse the dog.
- I will never train or encourage the dog to behave in an aggressive manner for the purpose of protection.

### Safety

- I will make sure the dog is always wearing proper identification, which will be provided by HSMC.
- I will advise HSMC immediately if I plan to change my address and/or phone number. I will request HSMC's permission to transfer the dog to my new address.
- I will advise HSMC immediately if the dog is lost or stolen, and make every reasonable effort to recover the dog, including, but not limited to contacting local shelters and veterinarians.

### Follow-up

- I will advise HSMC regularly as to the condition and adjustment of the dog. I will allow a HSMC representative to visit my home to check on the health and welfare of the dog, and for the purpose of determining compliance with the terms and conditions of this agreement if deemed necessary.
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### Transfer of Ownership

- I understand that I am acting as a temporary custodian of any and all dogs fostered for HSMC, and that HSMC remains the lawful owner of the dog. I will surrender the dog to a HSMC representative within 48 hours if requested to do so for any reason.
- I will never abandon the dog. I will never give, sell, or transfer ownership of the dog to another person, relative, rescue group, humane association, shelter or pound, pet store, or any medical or experimental laboratory or similar organization.
- If I transfer the dog without the knowledge and approval of HSMC, I understand that HSMC will reclaim the dog from the transferee and will pursue legal means to do so if necessary, and will pursue legal means to redress any harm done to the dog.
- If I decide that I would like to adopt the foster dog, I will advise HSMC and follow all adoption procedures. I understand that while I have been permitted to foster a dog, this does not precipitate permission to adopt. I understand that HSMC makes the final decision regarding the adoption of this dog, which is based on the best interest of the dog.

### Return

- If I am no longer able to foster the dog, I will contact HSMC immediately. Arrangements will be made within 72 hours for a HSMC representative to reclaim the dog.

### Liability

- I understand that HSMC cannot, and does not make any guarantees as to the health, temperament, mental disposition, and training of the dog. I hereby foster the dog at my own risk.
- I fully and completely release HSMC, its members and volunteers, from any and all claims and liability, including, but not limited to, any defects or illnesses the dog may have or develop, and for any injury or damage to persons, property, or other household pets, which may be caused by the dog. I further agree to indemnify and hold HSMC harmless against any and all claims and liability, including, but not limited to, those asserted by third parties for any injury or damage to persons or property caused by the dog.
- I certify that all the animals in my home are current in their vaccinations and heartworm prevention. I fully and completely release HSMC from any and all claims and liability for any illness that my animals might develop, even if said illness might have been procured from the dog fostered for HSMC.

## Spay/Neuter Agreement

- I will never breed a dog fostered for HSMC if he/she has not been spayed or neutered while in my care. I will take all necessary precautions to prevent a foster dog from breeding.

I certify that I have never been convicted of animal cruelty, neglect, or abandonment by a court of law or other governmental authority.

I certify that I have read this foster agreement in full (all 3 pages), and that I understand all of the terms and conditions. I understand that if I made any misrepresentation about myself or home environment, or if I don't abide by all of the terms and conditions of this agreement and my failure to do so in any way jeopardizes or adversely affects the health and welfare of the dog, that HSMC can terminate this contract for foster care and reclaim the dog without notice, irrespective of any expenditures that I have made, and may pursue legal means to do so if necessary. I understand that HSMC may pursue legal means to redress any harm done to the dog. I understand that this contract for foster care is legal and binding, and will be governed by the laws of the State of Illinois.

\_\_\_\_\_  
Printed name of foster parent

\_\_\_\_\_  
Signature of foster parent

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of HSMC Foster Coordinator

Date \_\_\_\_\_

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