

Foster Volunteer Application

Thank you for choosing to become a foster parent for Palm Beach County Animal Care and Control! Fosters play an essential role in helping us to save and assist as many animals as possible by providing a temporary home for them. There is no minimum age to become a foster parent, but there must be an adult in the household who will act as the primary caregiver. **If you are under the age of 21 (or older than 21 but still live at home) please have parent/guardian or Head of Household complete the application below. .**

***We are now encouraging and accepting fosters for kittens and cats. Any applications received for the purposes of dog fostering will be held for future processing*

(Please Print Clearly)

Name: _____ Birthday: ____ / ____ / ____
Address: _____ City & Zip _____
Home/Cell Phone: _____ Alternate Phone: _____
E-Mail Address: _____ DL # _____
Student Name for School Hours: _____ Age of Student: _____

Have you ever been charged with or convicted of any criminal offense, plead guilty, or nolo contendere (no contest), or found guilty of a criminal offense, regardless of adjudication or suspended sentencing?

() Yes () No If yes list nature of offense, court (City, County, and State), disposition, and date.

I understand that incompleteness in disclosure of criminal records or any falsification or misrepresentation on any forms is grounds for disqualification from the volunteer program.

Do you have a health, medical or allergies that would be affected by fostering for ACC? No () Yes ()
If yes, please explain so that we can try to accommodate you _____

Please note, as a registered foster you consent to the possibility of appearing in still or motion pictures, and your name and/or photo may be used for educational, promotional, or other purposes related to the mission of the organization.

Working in an open admission animal shelter where we accept any animal in need is emotional. For animals that are suffering from disease, injury or other infirmities, those that pose a safety threat, or those for which a caring home cannot be found, euthanasia is the most humane alternative. We ask that you consider our work here at the shelter and we understand if you prefer not to work directly with the animals but still want to help in an administrative capacity.

Signature: _____ Date: _____

Once your application is complete, please email to PBC-ACC-Rescue-Request@pbcgov.org. Once approved, you will be added to the Foster email list. When you see an animal you would like to foster, simply reply to the email and we will set up an appointment time for you to come in to pick up your foster & supplies.



Palm Beach County
Board of County Commissioners

Palm Beach County
Public Safety Department
Animal Care & Control Division
7100 Belvedere Road
West Palm Beach, FL 33411
(561) 233-1200
www.pbcgov.com/animal





Foster Caregiver Questionnaire
 Palm Beach County Animal Care & Control

Chameleon PID _____
___ Year Round Foster
___ Seasonal Foster
___ Need Foster Hours for School

Date: _____ Email: _____

Name: _____ Phone#: _____
 First Last

1. Have you read "Things to Consider Before Fostering"? () Yes () No
2. How many people live in your home? _____
3. How many children under the age of 10? _____
4. Do you have a pet at home? () Yes () No

Please list any pets you currently own*:

Pet Name	Type (dog, cat, etc.)	Age/ Weight	License Tag #
			L -
			L -
			L -
			L -
			L -
			L -

***Please note, all dog and cats in the home must be current on their rabies shot and County license tag before you can be approved as a foster volunteer.**

5. What kind of pet would you like to provide care for? Check as many as apply:
 () Bottle-fed Kitten (must have experience)
 () Mom & Kittens
 () Kitten
 () Adult Cat with Upper Respiratory Infection
 Adult Dog:
 () 40 + pounds with Kennel Cough
6. Are you willing to treat and care for a pet that may have an illness such as Kennel Cough (CIRD) or Feline Upper Respiratory (URI)? () Yes () No
7. **You must keep foster animals separate from your own pets.** Are you able to keep your own animals isolated away from the foster animal that you bring home? _____ If unable to do so, your application will automatically be denied.
8. Do you foster for any other animal rescue organizations or current ACC Foster? Please list below:



Foster Caregiver Pledge - I understand and agree to the following (please initial):

- ✓ The number of animals I am allowed to foster at one time will be limited by Animal Care & Control. This is in the best interest of the animals needing foster care.
- ✓ Foster animals must be housed indoors, in a quiet room away from other pets in the home (i.e. guest bedroom, bathroom, laundry room, climate controlled garage). ACC Foster Animals are not allowed to go to Dog Parks, Dog Beaches, etc. ACC Foster Dogs cannot be allowed to interact with any other animals including your own personal pets – this is for safety and medical reasons.
- ✓ The amount of time - unless legally adopted - I may foster a pet in my home, will be regulated by ACC. (average of 2-4 weeks).
- ✓ I understand that veterinary medicine is not an exact science. It is very possible that during the medical processing of the foster pet, some illness and/or injury and/or parasites may go undetected. The animal(s) released in the foster care program may be incubating a medical condition that could affect my personal animal(s) at home. Animal Care & Control will not be financially responsible for the treatment of my personal pet(s); i.e. ringworm, Sarcoptic mange, CIRDC, upper respiratory infections, etc.
- ✓ Animal Care & Control is able to provide **basic care** and medical treatment for animals; they do not have the funding or resources to provide extensive and prolonged treatment for sick or injured animals.
- ✓ Foster animals must be brought back for all re-check appointments in the time that is scheduled with the clinic. Please contact sphillip@pbcgov.org for any medical questions/concerns.
- ✓ If at any time a foster animal runs away, gets lost, is relocated, or dies, I must contact the Foster Coordinator. If the animal(s) dies, the body must be returned to Animal Care & Control.
- ✓ I will be financially responsible if I choose to bring my foster to my own veterinarian or for the treatment of any follow-up medical care for animals that Animal Care & Control chooses not to treat in-house due to limited resources. I do have the option of returning the animal(s) should I decide I do not want this responsibility.
- ✓ I agree to return the animal upon request, at the end of the scheduled foster period, or if I am no longer able to adequately care for the animal.
- ✓ ACC reserves the right to cancel my foster care agreement, conduct a home visit, and remove any and all foster pets if it is in the best interest of the animal or for just cause.
- ✓ Animal Care & Control reserves the right to decide the final disposition of all foster pets. This may include denying an adoption and/or euthanasia for space and time if not adopted. The Division Director reserves the right to make the final decision in the event of dispute.

I certify that all statements and answers to questions on this application are true.

Signature _____ Date _____

Long and Short Term Foster Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement

Foster Care for an animal is a time period during which the animal being fostered can resolve or improve medical and/or behavioral issues and allows all involved to get to know the animal before it is placed into a permanent home. Similarly, field trips, lunch dates, weekend sleepovers and other such short-term foster situations serve the same purpose and thus, the release and waiver of liability and assumptions of risk apply.

While Palm Beach County Animal Care and Control (PBCACC) cannot guarantee to the foster parent/family what type of temperament the fostered animal may have in the home environment, every measure is taken by PBCACC to ensure that animals being fostered, specifically dogs, are not exhibiting dangerous behavior while at the shelter.

Approved Foster Parents are required to agree to provide proper care for the animal and must sign all necessary forms as required or as become necessary due to changes in the animal's behavior or health. Foster Parents agree to abide by PBCACC's decisions as to the pet's ultimate outcome and understand that the foster pet is in their care temporarily and must be returned to PBCACC at the end of the foster period or upon request.

Release and Waiver of Liability:

IN CONSIDERATION OF BEING PERMITTED TO FOSTER AN ANIMAL FROM PALM BEACH COUNTY ANIMAL CARE AND CONTROL, THE UNDERSIGNED:

1. Acknowledges, agrees, and represents that he/she is aware of and assumes the many risks associated with being around animals, including but not limited to, the risk of being bitten, scratched, jumped on, knocked over, chased, tripped, infected with a zoonotic disease, or otherwise injured or frightened.
2. Acknowledges, agrees and represents that he/she is aware of the risks of damage to personal property by the animals while fostering.
3. Acknowledges, agrees, and represents that he/she is aware that PBCACC makes no guarantee as to the behavior of the animal being fostered and assumes full responsibility for any risk of bodily injury arising out of or related to the fostering of a pet from PBCACC.
4. Hereby assumes full responsibility for any risk of bodily injury to themselves or to their family, their own pets, guests, or other person while the animal is their care, or any property damage arising out of or related to the fostering of any pet from PBCACC
5. Hereby releases, waives, discharges, and covenants not to file suit against Palm Beach County Animal Care and Control, the Division of Public Safety, Palm Beach County Government or any of their respective employees, agents, members, directors, officers, or any affiliated entities thereof, for any loss, liability, damage, or cost arising out of bodily injury or property damage related to the fostering of an animal for PBCACC.

I have read this release and waiver of liability, assumption of risk and indemnity agreement. I fully understand its terms and understand that I have waived substantial rights by signing it. I have signed it freely and voluntarily without any inducement, assurance or guarantee being made to me and I intend my signature to be a complete and unconditional release of all liability to the greatest extent of the law.

Print Full Name

Signature

_____/_____/_____
mm dd yyyy

Address

City,

State

Zip Code

Witness

Witness

