



Foster Providers (FP) Contract Solano County Friends of Animals (SCFOA)

Foster Name: _____ Phone:(____) _____ Email _____

Address: _____ City _____ State ____ Zip _____

General Information

- All new animals must be registered by animal name, description, sex and approximate age; prior to receiving or participating in any SCFOA covered services.
- Full time Foster Providers are required to attend at least two (2) General Meetings per year.
- Foster Provider will ensure animals are altered, vaccinated and tested.

Foster Home Requirements

- Animals must:
 - be kept indoors (Felines) or have an enclosed, secured, yard with 6' fence (canines);
 - receive food, water and appropriate flea and worming control;
 - shall be kept separate from other animals until tested and vaccinated;
 - receive clean & adequate shelter, bedding, litter and be socialized.
- When applicable, the Foster Coordinator or designee may make a home visit.
- If the environment is deemed unsafe or animal requires additional vet care, SCFOA reserves the right to remove the animal.

Adoptions Requirements

- All animals must be altered, vaccinated and tested prior to attending adoption events or being adopted out.
- Animals must be brought to an adoption event on a weekly basis and placed on PetFinder through SCFOA
 - We request that FP help maintain a balance when there are multiple adoption locations on the same day
 - Failure to bring the animal to adoptions events can result in the animal being dropped from the Foster Program and SCFOA requesting reimbursement for altering, vaccines and testing for that animal.
- Foster animal's veterinarian records must be provided at adoption events.
- No Foster Provider shall adopt out an animal without meeting the Adoption requirements and all required forms be filled out completely, signed by adopter and paid in full. Adoptions must be pre-approved by a SCFOA adoption counselor prior to releasing foster animals.

Veterinary (vet) Care and Emergencies Process

- Foster Providers must contact the Foster Coordinator or a Board member immediately if the animal becomes ill or injured. All non-emergency vet visits **must** be pre-approved or SCFOA **will not** be responsible for any expenses incurred.
- Board members fostering animals will contact an alternate Board member for pre-approval of vet services.
- In the case of an emergency, the maximum initial vet fee **cannot** exceed **\$150.00**.
- If further treatments or tests are recommended by the vet, and an SCFOA Board Member is not contacted, the Foster Provider shall be responsible for any/all additional charges.

___ I have read and agree to the terms of the above requirements and vet care process.

___ I have been provided the SCFOA contact list.

___ I agree to contact a Board Member immediately if an animal becomes ill or injured and requires vet services.

Signature of Foster Provider _____ DATE: _____

SCFOA Representative Signature _____ DATE: _____



No More Homeless Pets



Foster Name: _____ Phone: (____) _____ Email _____

Address: _____ City _____ State _____ Zip _____

Foster Animal(s):

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F

Date: __/__/__ Animal Name: _____ Description: _____ Age: _____ Sex: M F