



Southern Comfort Maltese Rescue, INC  
PO Box 2005  
Chattanooga, TN 37409  
Phone: 423-443-4082

## FOSTER CARE CONTRACT

**Before a dog can be placed in your home we will perform the reference checks and a home visit, and you must sign and send us this original Foster Care Contract.**

I, \_\_\_\_\_, do hereby enter into this contract with Southern Comfort Maltese Rescue, Inc. (SCMR) of my own free will and agree to give foster care and shelter to rescued dogs for a limited period of time. I further know and understand that SCMR does not have complete prior knowledge of the rescued dogs' health and temperament, and I shall take all necessary precautions to protect myself and others who might come into contact with the dog(s). I understand and agree that I shall not hold SCMR responsible for any injury, illness or disease contracted by any dogs or other animals privately owned, or for property damage or harm to other dogs or persons who may come into contact with a foster dog(s) while it is in my care.

\_\_\_\_\_ I agree that the dog(s) I am fostering shall not be removed from my address or disposed of without agreement and support of SCMR and I will return the foster(s) immediately should some problem or circumstance arise where I am no longer willing or able to care for the foster dog in my home in the manner which SCMR expects from its foster care providers.

\_\_\_\_\_ I understand that SCMR shall be responsible for the payment of all necessary veterinary care of the foster dog while the dog is in my care, but any veterinary visit must have prior approval from a SCMR Director, except in the case of a life or death emergency. I shall keep a record of the approval with the date. I further understand and agree to pay for all veterinary care, if necessary, until such reimbursement of funds is made by SCMR. I shall maintain clear and accurate records of all expenditures and keep original receipts, and I realize that no reimbursement shall be made until all such records are received by SCMR. In order to be reimbursed for expenses for the foster dog(s) I shall submit original receipts along with notation of the approval given by a Director for that expenditure, a clear explanation of what the expenditure was for and the total amount to be reimbursed.

\_\_\_\_\_ I am fully aware that under no circumstances shall a SCMR foster dog be bred or be allowed to breed, and I shall take all necessary precautions to prevent this from happening. I agree to keep all SCMR dogs in safe, sanitary and healthy conditions and to provide them with love and attention to help them overcome any fear or aggressiveness that causes unacceptable behavior. I understand and agree that all SCMR dogs must be spayed or neutered as quickly as possible and be provided with basic medical care as outlined in the Foster Care Volunteer Manual before a placement is made.

\_\_\_\_\_ I understand that under no circumstances does SCMR pay for boarding at a foster home. This is a volunteer organization that does not pay foster care providers for their time or services in any way.

\_\_\_\_\_ I shall, upon request, immediately release any SCMR foster dog to a representative of the organization within 24 hours of the request by a SCMR Director.

\_\_\_\_\_ I understand that I have no authority to place or promise any foster dog in my care to any home without concurrence from a SCMR Director. This includes returning the dog to its original owner.

\_\_\_\_\_ I agree to return any SCMR property to SCMR when leaving the program or when asked to return by a Director; property is defined as anything purchased for the use and benefit of a rescue dog paid for by SCMR. The foster home may store SCMR property, but items will remain the property of SCMR.

\_\_\_\_\_ In the event of abuse or injury to any of the foster dogs or in the case of a breach of contract, the foster dog(s) must be returned immediately, with all dog related items the previous owner may have provided with their dog, and all paperwork included, to SCMR at my sole expense.

\_\_\_\_\_ I acknowledge that I have read and understand SCMR's Foster Care Volunteer Manual, agreeing to abide by the policies/items addressed. Also understanding the manual is a guideline that can be updated as needs arise

\_\_\_\_\_ I enter into this contract with SCMR with the full knowledge that I will be responsible for the safety and well-being of the foster dog while it is in my care, and I shall abide by all agreements and understandings set forth in this Foster Care Contract. This contract shall be governed by the laws of the State of Tennessee.

Foster Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_

Foster physical address (print clearly) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

E-mail Address (print clearly) \_\_\_\_\_ Phone \_\_\_\_\_

SCMR Representative \_\_\_\_\_ Date \_\_\_\_\_

If you have any questions regarding this agreement and contract, please contact us at [scmr1@yahoo.com](mailto:scmr1@yahoo.com) or call 423-443-4082

**Please complete and return original copy of this contract to:**

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PO Box 2005  
Chattanooga, TN 37409