Lost Our Home
Off-Site Fostering Agreement

Animal Name: ___________________________ Type: ___________________________

Select One:  □ Weekend Getaway  □ Foster to Adopt  □ Foster

The foster home shall provide a warm, clean and loving environment, food and any medications as required for any and all animals in their care. The foster home agrees to bring the animal into the shelter as scheduled for medical care and vaccinations. The foster home agrees to only allow dog(s) outside under proper supervision. Foster animals should be transported in carriers only. The foster home agrees to monitor the health of the animal(s) and to contact the Shelter & Medical Director at 480-266-3228 (text is preferred) immediately in the event of questions regarding the health or safety of the animal(s). If the Shelter/Medical Director is unavailable, contact the Shelter Operations Manager at (623) 734-2259. Either one of these staff members MUST authorize veterinary care before services are rendered. Unauthorized veterinarian expenses are the responsibility of the foster home.

The parties agree that the LOH animal(s) shall be isolated from any other animals currently living in the foster home; this is for the safety of your pets and the LOH foster animals. In the event that the foster animal is commingled with other animals in the home and injury or illness results, veterinary expenses shall be the sole responsibility of the foster home.

By signing below, I agree to the following: I agree to return the animal at the agreed upon date/time. If I am going to be late, I will call the front desk at 602-445-7387 to let them know of the approximate return time.

NOTE: For Weekend Getaway Program (Volunteers Only), dogs must be returned before the shelter opens for business on Tuesday at 11:00 a.m.

- (CAT) I agree the cat will remain indoors at all times.
- (DOG) I agree the dog will be on a leash at all times while outside.
- (DOG) I agree not to take the dog to dog parks, pet stores, doggie day cares, veterinary facilities or any other areas not approved by LOH.
- I agree that the animal will be in my care at all times.
- I agree to feed the animal the food provided and give appropriate medications (if applicable).
- I agree to notify the LOH staff immediately of any injury inflicted by the animal to my family or the general public.
- I agree to return any/all borrowed supplies. I understand and agree that I will be charged for items not returned.

Name: ___________________________ Phone Number: ___________________________
Address: ___________________________
Email Address: ___________________________
Signature ___________________________ Date: ___________________________
Staff Signature ___________________________ Date: ___________________________

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Date Picked Up at Shelter: ___________________________  Date to Be Returned to Shelter: ___________________________

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Foster Care Contact Sheet

Thank you for opening your home to a foster pet in need! Your decision to take an animal into your home to provide a safe, nurturing environment is a tremendous help and enables us to bring in more animals in need. If you have any questions, concerns, or if any medical emergency situations develop during your time fostering, please contact us. We are here to help!

Foster Coordinator: Estevan Vega - estevan@lostourhome.org
Our foster team is best reached at:
Fostering@lostourhome.org
Shelter telephone number: (602) 445-7387
Our phone lines are open the following days/hours:
Tuesday, Thursday, Friday: 11:00am-6:00pm
Saturday & Sunday: 10:00am-4:00pm
Monday & Wednesday: As our shelter is closed to the public our phones will go directly to voicemail during these days.

Medical Contact Person (Non-Emergency)
If you have any non-emergency health-related concerns, email fostering@lostourhome.org as soon as you notice a problem—DO NOT wait until a crisis occurs. Be as detailed as you can and provide photos if needed. In the care and treatment of foster animals, there is no such thing as a silly question!

When you call, it will be helpful for us to know:

1. Is the animal vomiting?
2. Does the animal have diarrhea?
3. Is the animal active or listless?
4. Is the animal eating and drinking

Medical Contact Persons (Emergency)
Call the Shelter & Medical Director Emily Vivian at (480) 226-3228 (TEXT PREFERRED- personal cell phone for foster use only).

If you are unable to reach Emily, please contact the Shelter Operations Manager at (623) 734-2259 (personal cell phone for foster use only).

IMPORTANT: Do not take your foster animal(s) to a veterinarian without the approval of a Lost Our Home staff member. Any charges incurred without approval will not be reimbursed.

Examples of emergency medical symptoms:
The shelter should be notified of the following conditions immediately:
• Blood from any orifice/opening
• Blood in vomit or vomit that is dark in color
• Blood in the urine, or if the foster animal is unable to urinate at all

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• Blood in the stool, especially with diarrhea
• Congestion, wheezing, or labored breathing
• Fever (often accompanied by lethargy)
• If an accident has occurred and the foster animal appears to be injured
• Lameness that appears severe and painful
• Pain – irritability when handled or touched, particularly if it seems out of character for that animal
• Seizures or convulsions

Examples of non-emergency medical symptoms:

• Any change in the appearance of the eye: squinting, winking, tearing, swelling, redness, yellow, green, or crusty discharge
• Coughing for less than 24 hours
• Diarrhea/loose stool (in adult animals and less than 48 hours)
• Excessive drinking for more than 48 hours
• Increased appetite for more than 1 week, especially when accompanied with weight loss
• Increased scratching at any part of the body including head shaking
• Increased urination or sudden accidents in the house, difficulty urinating, and straining for less than 24 hours
• Nasal discharge – white, yellow, or green
• No apparent weight gain, especially with puppies and kittens during a 72-hour period
• Poor appetite for more than 48 hours
• Sneezing for more than 24 hours
• Unexplained lameness that does not improve with rest within 24 hours
• Vomiting more than three times
• Weight loss is observed over a 48 hour period, especially with kittens, puppies, or nursing mothers– when weight loss is accompanied with normal to more-than-normal food intake
• Hair loss

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Credit Card Authorization

Please complete all fields.

Credit Card Information

Card Type: [ ] MasterCard  [ ] VISA  [ ] Discover  [ ] AMEX

[ ] Other ______________________

Cardholder Name (as shown on card): ___________________________________________

Card Number: ___________________________________________ Expiration Date (mm/yy): ____________________

Cardholder ZIP Code (from credit card billing address): ___________________________________________

I, _______________________________, authorize Lost Our Home Pet Rescue to charge the credit card above in the event of failure to return fostered animal(s) or borrowed items.

Customer Signature ______________________________________________ Date __________________________

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## Items Borrowed

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<tr>
<th>Item</th>
<th>Quantity</th>
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<tbody>
<tr>
<td>Bowls</td>
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<td>Crate</td>
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<td>Heat Pad</td>
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<td>Nebulizer</td>
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