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**Cat Team 7**

 No Cat Left Behind

A Joint Initiative Between the Norfolk SPCA

And Naval Station Norfolk

**Cat Foster Contract**

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Kitten/Cat Name: Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Description/Color Male/Female Spayed/Neutered Approx. Age

Special Attention:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In consideration of Cat Team 7 releasing the above described cat/kitten to me for fostering, I agree to the following conditions:

1. I will monitor the spay/neuter incision, ear tipping site, and any other areas attended to by the vet for possible infections and good healing.
2. I will maintain an immaculately clean cage or room space for the animal while in the healing phase after surgery and reasonable cleanliness thereafter.
3. I will provide adequate food, water, shelter, space, exercise, personal attention, play time, love, and affection for this animal in accordance with Section 3.1-796:68 of the code of Virginia; I will continue to provide the same food given to me by Cat Team 7 or required by Cat Team 7.
4. I will spend as much time as possible handling the animal, especially in the 3 days post-surgery, and during the duration of the fostering, in an effort to socialize the animal and make him or her more comfortable with, and trusting of, humans.
5. I will handle the animal safely at all times and demonstrate proficiency at scruffing before the Cat Team 7 representative leaves the animal with me. I will ensure that whenever moved or handled, every effort is made to prevent falls or injury.
6. I will transport the animal to any follow-up shots or boosters as scheduled and paid for by Cat Team 7 or coordinate with another foster/transporter to accomplish this.
7. I will keep this cat/kitten as a strictly indoor foster and not allow him/her to run outside at large in violation of local animal ordinances. Once feral animals CAN NOT go outside.
8. If windows are open, I will ensure screens are hole-free and secure. When exterior doors are opened, I will vigilantly watch to ensure the animal does not escape. If the animal is transported, it will be kept INSIDE a cat carrier at all times. Occasionally, a foster kitten will escape its room/cage and hide in a closet, piece of furniture, or otherwise inaccessible space. In time, food motivation will get him/her out. Call us and we can help.
9. I will ensure there are no dangerous items in the room where the cats/kittens are kept, including chemicals, soaps, cleaning products, small parts, etc. If the fostering room is a bathroom, I will ensure the toilet lid is closed at all times and weighted. I will ensure that all exterior and floor vents are covered or 100% secure.
10. I accept the animal in his/her current condition and realize this is a feral cat/kitten, potentially interacting with only his/her second or third human. I acknowledge that Cat Team 7 is not liable for any scratches/bites as a result of improper handling or simply the animal’s reaction to stress or fear.
11. I agree to keep the above named cat/kitten for the agreed duration of the foster period and will not give him/her away to anyone except back to Cat Team 7 unless I opt to permanently adopt or am authorized to complete an adoption for Cat Team 7. The foster period can be ended early by either party as life circumstances can rapidly change, however, I agree to return the cat/kitten to Cat Team 7 only.
12. If the above named animal becomes sick, disappears, or dies during the foster period, I agree to notify Cat Team 7 immediately and retain the unaltered body for pick up, if possible.
13. I understand that the above named cat/kitten has been rescued from a feral colony and his/her behavioral and medical history is not completely known. I understand that every reasonable effort has been made to ascertain his/her good health and temperament, but not every disease or condition can be ruled out or tested for. I agree to foster this cat/kitten in his/her current state of apparent good health and will keep Cat Team 7 apprised of any and all symptoms, illnesses, or injuries at any time during which the animal is in my custody. Cat Team 7 requires isolation from household pets for 5 days and recommends isolation from household pets for 2 weeks. **I understand that allowing the foster animal to interact with my personal pets CAN expose them to parasites and diseases and that if I choose to allow interaction, the financial responsibility for treatment of anything my personal pets may develop is my own;**
14. I understand that being a feral cat/kitten from a wild/feral colony, this animal may, on occasion, revert to a feral behavioral response when threatened or encountering new situations. I accept that a significant part of this fostering will be building trust between the humans and animals of this household and the above described animal and will not force this animal to behave in any manner in which it does not wish, with the exception of forced handling/petting known as “struggle snuggle”. I accept that the period of time required to establish trust may be longer with the above described animal, than with domestically born animals, as a result of its feral birth and early life, but that I will do everything in my power to foster and nurture that bond on the animal’s time table.
15. I will employ all techniques recommended by Cat Team 7 for the socialization and domestication of this animal including eye communication, body language, body positioning, auditory interaction, interaction with toys, handling, petting, and learning by example. I will reach out for help to other fosters within the Cat Team 7 family and to Cat Team 7 when I am not making progress at socialization for help with the techniques and additional training.
16. I agree that Cat Team 7 has the right, at their discretion, to reclaim this animal if there is reason to believe the home is not fit or the terms of the fostering are not being carried out, and I give permission for a representative of Cat Team 7 to come onto my premises where the animal is kept for the purposes of retrieving him/her under these conditions.
17. In the event that I am unable to continue fostering this animal for any reason, I agree to return said cat/kitten to Cat Team 7 and contact them immediately by phone to arrange a pick up.
18. I agree that this is a legal and binding contract, and by accepting this agreement, I hereby release Cat Team 7 or its representatives, volunteers, or successors from any damage to my home, person, or belongings as a result of this fostering.
19. In the event that it becomes necessary to forward this contract to an attorney for enforcement, I shall pay reasonable attorney’s fees and court costs incurred by Cat Team 7, and any designated representative.

I have read and understand all of the above conditions, and by my signature on the line below, I AGREE to abide by all conditions of this Fostering Contract.

Foster Parent: (Print Name):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Foster Co-Parent (Print Name): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address Animal where will Reside:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Co-Foster Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Co’s Home Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address(es):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Co-Foster’s Employer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RELEASING AGENT (Print Name):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_