



DIGHTON POLICE DEPARTMENT  
Office of Animal Control

1458 Somerset Ave.  
Dighton, MA 02715  
Phone: 508.669.6711



**Dog Foster Contract**

Dog's Name: \_\_\_\_\_ Dog's ID: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Spayed/Neutered?: \_\_\_\_\_ Breed: \_\_\_\_\_ Color: \_\_\_\_\_

Date of Vaccinations: \_\_\_\_\_ Rabies: \_\_\_\_\_

Microchip #: \_\_\_\_\_

Upcoming appointments: \_\_\_\_\_

Date foster care period begins: \_\_\_\_\_

Date foster care period ends: \_\_\_\_\_

I understand that I will provide foster care for the above-mentioned dog from **Dighton Animal Control** at no charge and I agree to the following conditions during the foster care period:

- I agree that I am fostering this dog for **Dighton Animal Control** and that I do not have any right of ownership over the foster dog. I further agree that **Dighton Animal Control's** rights in and to the foster dog are priority to mine.
- I will accept and consider the dog as a household companion, not as an outside pet, and will provide the dog with a safe environment, humane treatment, proper food, fresh water, shelter and exercise.
- I will allow a reasonable amount of time for the dog to adjust to new surroundings. Dogs typically take a week or more to settle into a new home.
- **Dighton Animal Control** will cover veterinary expenses for the dog, provided that the care is pre-approved by the **ACO** director and performed by a **Dighton Animal Control**-authorized veterinarian. I agree in the case of an emergency, I am to make every attempt to contact the **ACO** and go to an approved **Dighton Animal Control** emergency veterinarian.
- If the dog is lost or stolen, I will immediately notify the **ACO** and I will make every reasonable effort to recover the dog.

- I will NOT give or sell the dog to another person, relative, or any other individual, or any other rescue group, humane association, shelter or pound, or any medical or experimental laboratory or organization.
- I will NOT alter the dog's appearance in any way, shape or form such as tail docking, ear cropping, etc. Routine grooming is approved.
- I will not remove the dog's microchip.
- I will immediately notify **Dighton Animal Control** in the event of the dog's death during the foster care period.
- I will allow the **ACO** to make periodic visits to my home during the foster care period.
- I will immediately notify the **ACO** in any change of address, phone number, email address. I will also notify the **ACO** of any plans to move or travel.
- I will immediately notify the **ACO** of any need in returning the dog to the rescue.
- I will immediately return any foster dog in my care to **Dighton Animal Control** at the request of the **ACO** at any time and for any reason.
- Should I decide to adopt the dog, I will notify the **ACO** and follow adoption procedures.
- I understand that **Dighton Animal Control** makes every attempt to accurately represent the dog and that no representations are made by the **ACO** as to the temperamental or mental disposition of the dog.
- I understand **Dighton Animal Control** makes every attempt to fully vet the dog prior to going into foster care, but in emergency foster situations, I am responsible for bringing the dog to any vet appointments or making plans for the **ACO** to if I am not able to make that appointment.
- I agree to foster the dog at my own risk, and indemnify and release **Dighton Animal Control**, its officers and volunteers, of any and all liability arising from damages to person(s) or property caused by the dog.
- If **Dighton Animal Control** is forced to undertake any action to enforce this agreement, I agree to indemnify **Dighton Animal Control** for all court costs and attorneys' fees connected with such an action.

**Foster Care Provider's Information:**

Name: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone Number(s): \_\_\_\_\_

I have read and fully understand the terms and conditions of this agreement. I further understand that if I fail to comply with any of the terms specified herein, **Dighton Animal Control** has the right to reclaim the dog and to enforce this contract in a court of law.

\_\_\_\_\_  
Foster Care Provider's Signature & Date

\_\_\_\_\_  
Dighton Animal Control Officer & Date