



Voice For Horses Rescue Network, Inc
www.voiceforhorses.org
PO Box 566 Toledo, Ohio 43697
419-350-4195
voiceforhorses@att.net

Application & Contract to Foster

INSTRUCTIONS FOR COMPLETING THIS APPLICATION

Please read and complete this entire document carefully and mail it to the address above or scan and email it to voiceforhorses@att.net. This application must be completed in full and signed with an actual signature (not typed). Applications that are not completely filled out will not be approved.

Note: This agreement is for the protection of the horse and the foster home, not to keep you from fostering one.

APPLICATION PROCESSING

All information and references submitted on this application may be reviewed by our staff and in signing it you are agreeing to the terms within. Horses are placed on the basis of what is best for the horse at the time of need. In cases where there is more than one request for the same horse, the decision as to foster home will be voted on by our Board of Directors.

APPROVAL

Once this application is approved by the Voice For Horses Rescue Network Board of Directors and signed by a representative, it is a legally-binding contract and agreement regarding the foster's care of the foster horse(s).

YOUR INFORMATION:

Name (First and Last): _____

Email address: _____

Primary Phone: _____

Alternate Phone : _____

Address: _____

Employed by: _____ Title: _____

Address: _____ Phone: _____

Email: _____

Please circle one of the underlined options.

HOUSING:

The foster horse will be housed at:

Address: _____

Contact person: _____

Phone: (_____) _____ - _____

Email: _____

This is a boarding facility / private residence / other (if other, please explain).

The type of housing/shelter which will be provided for the horse is:

_____ (size _____)

Type(s) of fencing: _____

This facility can/ cannot provide quarantine facilities

The daily feeding will be done by _____ (person).

The facility is _____ miles from my residence.

EXPERIENCE:

I have / have not owned a horse / burro/equine. _____

I currently do / do not own a horse / burro/equine. _____

If you currently own a horse/burro/equine, how many? _____

Please list their age(s) and breed(s): _____

I have / have not fostered a horse before. _____

If yes, what rescue did you foster horses for?

Name: _____ Phone: (_____) _____ - _____

Address: _____

Email: _____

REFERENCES:

References should not be members of your immediate family. The vet and farrier may not also be listed as a personal reference. *Please tell your references to expect to hear from an VFHRN volunteer and authorize your vet and farrier to talk to Voice For Horses Rescue Network.*

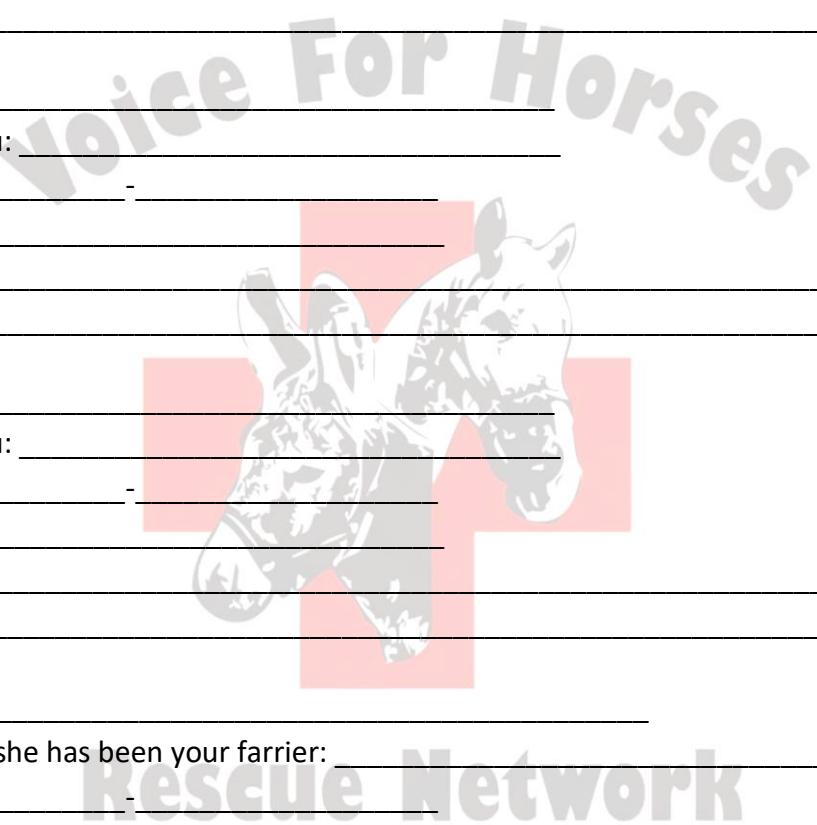
1. Name: _____
Relationship to you: _____
Phone: (_____) _____ - _____
Email: _____
Comments: _____

2. Name: _____
Relationship to you: _____
Phone: (_____) _____ - _____
Email: _____
Comments: _____

3. Name: _____
Relationship to you: _____
Phone: (_____) _____ - _____
Email: _____
Comments: _____

4. Farrier Name: _____
Length of time he/she has been your farrier: _____
Phone: (_____) _____ - _____
Email: _____
Comments: _____

5. Veterinarian _____
Length of time he/she has been your vet: _____
Phone: (_____) _____ - _____
Email: _____
Address: _____



This veterinarian will _____ will not _____ be the veterinarian caring for the foster Horse.

If not, please provide the name of the veterinarian who will be caring for them:

Veterinarian _____

Phone: (_____) _____ - _____

Email: _____

Address: _____

Please notify your vet that a Voice For Horses Rescue volunteer will be contacting them and give them permission to release information.

Confidentiality Statement: I agree that certain information concerning Voice For Horses rescue Network may be confidential and I will use discretion discussing VFHRN policies, procedures, cases and other business with anyone.. I also understand that as part of my volunteering, it is a privilege not a right . No email message will be forwarded to or discussed Information with anyone without receiving permission from an officer of VFHRN. I have read, understand, and agree to abide to this statement outlined herein.

Signature

Date

WAIVER OF LIABILITY:

By signing below, the foster understands that Voice For Horses Rescue makes no representations or warranties concerning any horse offered for foster through the programs, including but not limited to the condition, health, temperament, soundness, or fitness for particular purpose.

Foster's Initials

Date

Foster understands and agrees that Voice For Horses Rescue, its officers, directors, representatives, volunteers, agents, servants, and assigns, are not liable for any representations or misrepresentations concerning any horse offered for foster through this program; all information listed on the website via www.voiceforhorses.org, and/or divisions thereof, regarding any particular horse is based solely on information provided by the owners or authorized caretakers

Foster's Initials Date

I, ____ (foster), do hereby release Voice For Horses Rescue , its officers, directors, representatives, volunteers, agents, servants, and assigns (collectively "Releasees") of and from any liability arising from representations, misrepresentations, care and handling of the horses offered for adoption/sale either via www.voiceforhorses.org or any divisions thereof.

Foster's Initials

Date

I further agree that Releasees are not liable for the mistakes and/or negligence and/or intentional acts of service providers and/or contractors such as livestock haulers, veterinarians, or handlers who may at any time be in the care, custody and control of the horse I am fostering. I understand that I may pursue claims against such third parties for any damages caused by mistakes, negligence and/or intentional acts of such third parties during the time that my horse is in their care, custody and control.

Signed

Printed Name

Date

AGREEMENT:

Signing this application authorizes Voice For Horses Rescue to contact the listed references and inquire about your equine experience.

Foster's Initials

Date

It is agreed that said animal is in foster, only, and remains the property of Voice For Horses Rescue. It is further agreed that the horse may not be sold or transferred in any way into the custody of another person without prior approval, in writing, from Voice For Horses Rescue.

Foster's Initials

Date

Foster understands that the horse in their care remains available for adoption and may be adopted at any time. Foster further agrees to assist in finding a suitable adoptive home for the horse in their care by providing evaluations as requested, monthly updates, and photos/videos of the horse to be used in promoting it for a forever home, and responding to potential adopters promptly and honestly. Updates, information, photos and videos submitted become the property of Voice For Horses Rescue and may be used and published in marketing and other material.

Foster's Initials

Date

Foster understands that they are responsible for the ordinary day to day expenses of the fostered Horse (feed, housing, farrier, shots, ordinary veterinary care). Voice For Horses Rescue is responsible for the horse's expenses prior to its arrival at the foster home, including purchase, quarantine (if applicable), transporting it to the foster home, and costs of extraordinary veterinary care, euthanasia and carcass disposal, if necessary.

Foster's Initials Date

Finally, the undersigned agrees that the horse is not to be bred,. Any foal born to a foster mare falls under the same conditions per this agreement as the dam.

Foster's Initials Date

In the event the undersigned fails to comply with the terms of this Application and Agreement, Voice For Horses Rescue reserves the right to commence legal proceedings to recover the horse, and the undersigned shall be liable for all costs including damages to Voice For horses rescue Network, Inc. is assumed at a minimum of \$5,000.00, inclusive of attorney's fees, in connection with such legal proceeding.

Foster's Initials Date

This agreement is accepted by:

Signed Printed Name Date

**Foster's signature warrants that the foster is at least 18 years of age at the time of signature and acknowledges receipt of the Terms and Conditions contained within this agreement.*

I, _____, agree to foster the described animal(s) with the following understanding:

1. I agree to foster this animal for the benefit of the animal and not for any personal gain or expectation of ownership.
2. I understand there will be no charge to Voice For Horses Rescue Network (VFHRN) for boarding the animal(s) unless otherwise defined.

3. I understand the animal(s) has been admitted from conditions that may affect its health, behavior and personality.
4. I understand that VFHRN warrants that it has no knowledge of any vicious or destructive tendencies on the part of the animal. I acknowledge and understand that animals by nature are somewhat unpredictable, and that the animal may cause damage to persons or objects associated with the caregiver or caregiver's premises / boarding facility. I nevertheless agree to assume that risk.
5. I understand that VFHRN will not incur any sort of liability, expense or injury associated with any illness or disease my animals or neighboring animals may contract from the animal(s) I am fostering.
6. I understand that VFHRN will not incur any sort of liability or expense associated with any illness, disease or injury any person may contract from the animal(s) I am fostering.
7. Foster homes must provide for the horse's expenses while in their care. This includes routine veterinary care, farrier, feed, worming, and boarding expenses.
8. I understand that VFHRN must be contacted prior to any veterinary treatment. Voice For Horses Rescue Network must approve treatment. The animal must be seen by the veterinarian VFHRN specifies for all follow up, maintenance or non-emergency care. I understand that any veterinary costs will be at my own expense.
9. Should an emergency arise, I will call the Voice For Horses Rescue Network before the vet.
10. Farrier care will be provided every 6-8 weeks and I will notify the humane agent if there is a need outside of the scheduled visits. The farrier to provide care is chosen by VFHRN
11. The animal(s) in my care are not to leave the premises unless instructed to by VFHRN.
12. I understand the animal I am caring for is not to be ridden (if applicable). If permission has been given to me for training and riding, then I will not allow anyone not approved by VFHRN to ride.
13. I understand that as a foster home, I will have first option to adopt the animal through VFHRN. If I decline adoption and another home is found, then I will not interfere with the adoption.
14. While responsible for care of the animal in a reasonable and humane manner, I am not liable for injury or death that may occur to the animal while in my care.

15. I agree to immediately return all animals fostered to VFHRN if and when requested to do so.

Description of animal(s) to be fostered:

Animal ID #: _VFHRN-_____

Name: _____

Breed: _____

Sex: _____

Age: _____

Color: _____

Weight: _____

Height: _____



Markings (brands and/or scars) _____

Condition: _____

Name of Foster (printed)

Signature of Foster

Date

Rescue Network

APPROVAL:

Signed _____ **Date** _____

Voice For Horses Rescue Board Member