



Cast Aside To Survive (C.A.T.S.)

501©3 CastAsideToSurvive.org

Foster Agreement

Name: _____ Date: _____

Address: _____ City/State/Zipcode _____

Home phone: _____ Cell phone _____

e-mail address: _____

I agree to the following job description as a foster for C.A.T.S. :

- ___ Kittens/Cats remain the property of C.A.T.S.
- ___ I will provide food, water and socialization to the Kittens/Cats in my care.
- ___ If there is questionable exposure from our kittens to personal pets or personal pets to kittens, I will advise ASAP!
- ___ No medical treatment shall be sought without prior consent from C.A.T.S.
- ___ I will inform C.A.T.S. if there are any concerns with the Kittens/Cats in my care.
- ___ Kittens/Cats **MUST be** promoted WEEKLY on personal social media with the tags of "C.A.T.S."
- ___ I will supply **at least weekly** photos or videos to C.A.T.S. for promoting.
- ___ **All adoptions must be processed through C.A.T.S.** I will refer interested persons to C.A.T.S.
- ___ Kittens/Cats may be visited in your home by members of C.A.T.S. for various reasons.
- ___ Kittens/Cats may be removed at the discretion of C.A.T.S.
- ___ I will give advance notice if I can no longer foster the Kittens/Cats in my care.
- ___ I **will not** find foster coverage without the proper approval from C.A.T.S.

All personal information on this form shall be maintained for internal use only and shall not be distributed to external agencies except as required by law. I certify that I understand and will adhere to the above terms. I have read and fully understand the terms and conditions of this release. I further understand that these provisions are binding and enforceable by law.

Signature _____ Date _____

C.A.T.S. 444 Glenerie Blvd, Saugerties NY 12477 845-389-1178 CastAsideToSurvive@gmail.com

Rev 12/23/2019

C.A.T.S.Foster Agreement

1. I understand my services are provided strictly on a voluntary basis and I will not portray myself as an employee or official representative of the **C.A.T.S.** in any capacity. I also understand that the **C.A.T.S.**, without notice or hearing, may terminate my services as a volunteer at any time, with or without reason.
2. As a volunteer, I will abide by all rules, regulations, policies, and procedures of the **C.A.T.S.** In particular, I fully understand that the **C.A.T.S.** expects high standards of moral and ethical treatment of the animals under its care.
3. As a volunteer with **C.A.T.S.**, my duties require that I handle and care for cats, as explained in the job descriptions. I understand that some cats, although appearing to be temperamentally sound, may become fractious, wild, angry, and/or defensive, or otherwise behave in an unexpected manner.
4. The **C.A.T.S.** values the concerns and opinions of each and every volunteer. All complaints and concerns shall be directed to administration so issues may be resolved as quickly as possible.

CODE OF ETHICS:

1. Respect others, even when disagreeing, display courtesy, sensitivity, consideration, and compassion for people and animals, and use good judgment in recognizing the scope of employees' authority.
2. Safety remains at the forefront in all activities, following all rules, respecting and using equipment and supplies as instructed and intended, and reporting all injuries *immediately* to staff.
3. Self-discipline in recognizing the limitations of myself and others, setting boundaries for myself, and holding myself accountable for the commitments I undertake.
4. Communication is critical as both written and verbal skills, in listening to others, and advising staff of relevant information regarding the animals and my involvement at the shelter.
5. Welfare is important in understanding my role in the organization, striving to promote a positive environment, and respecting and supporting staff, volunteers, and the animals.

RELEASE:

I agree to release, discharge, indemnify and hold harmless the **C.A.T.S.**, its Board, employees, volunteers, and agents, for any and all claims for injury, illness, disfigurement, death, or any other occurrence happening during the performance of duties, including any created by an animal(s) that I may come into contact with through **C.A.T.S.**

Volunteer Signature _____ Date _____

Volunteer Coordinator /C.A.T.S. Representative

Signature _____ Date _____

As a parent or legal guardian of the above named volunteer, I hereby give consent for my child or ward, as the case may be, to become a volunteer for the **C.A.T.S.** as described in the above Volunteer Agreement and, by my signature below, agree to be bound by the terms and conditions of the Release above.

Parent/Guardian _____ Date _____

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