Newfoundland Health and Rescue Inc. Foster Agreement



| l, | | hereby volunteer to keep one |
|---|---|---|
| Newfoundlan | nd (male / female) named | |
| call name to keep this o Rescue Com | as described in the attache dog until permanent or other arrangements mittee of the Newfoundland Health and Rose Rescue Chair or his or her representative | s are made for its care by the escue, Inc. and agree to release |
| • | ide by the guidelines, policies and procedue Committee. | ures of the NHR and the direction |
| this dog. How specifically, a shots/heartwoneeds further must be disco requests for r | that no reimbursement will be made to me wever, NHR will reimburse me for routine in a physical check-up to determine the gene form testing, if needed. If the attending vetor veterinary care beyond the initial examinates ussed with and approved by the Rescue Creimbursement of approved expenses must be anied by written receipts. | nitial veterinary costs, ral health of the dog, and booste erinarian determines that the dog ation, all procedures/treatments committee in advance. All |
| temperament release and h Newfoundlan | here is no guarantee, warranty or full know t. I volunteer to accept it in my charge as a hold harmless the Newfoundland Health an nd Club of Northern California, Inc., their of d all liability or responsibility in connection | a humanitarian act and agree to nd Rescue, Inc, the fficers, directors and members, |
| I have read the contents. | he foregoing and execute this agreement v | with the full understanding of its |
| Signed: | | _ |
| Address: | | _ |
| Telephone: | | - - |
| Date: | | _ |
| | | |