



**Adopt A Bird Chairperson**

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**Adopt A Bird Committee**

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## Foster Care Contract

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Foster Parent Name	Full Address	Phone
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Agree to provide for RAAVE (Reno Area Avian Enthusiasts) temporary foster care in my home for:

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Bird's Name	Species	Age	Color
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According to the following terms and conditions:

1. I agree to humanely care for this bird and to provide the appropriate food, water and shelter necessary for his/her well-being. I agree to seek the services of a RAAVE approved veterinarian if necessary and appropriate for this bird's health.
2. If at any time during my foster care of this bird I plan to move from my current residence (address listed above), I agree to contact RAAVE informing them of my plans to move to a new residence.
3. I acknowledge that RAAVE is the sole owner of this bird and is responsible for all emergency veterinary expenses incurred during foster care. RAAVE requires that you use Mark Ditsworth, DVM or the Emergency Animal Hospital for all foster bird veterinary care. You are **required** to contact The Adopt A Bird Chairperson prior to receiving such care so that the committee is aware of upcoming expenses.
4. I acknowledge that RAAVE makes no promise to permanently adopt this bird to me. If I want to permanently adopt this bird, I agree to go through the normal RAAVE adoption process. I acknowledge that I may or may not be approved for permanent adoption of this bird.
5. I agree to return this bird and all equipment to RAAVE when my foster care is terminated by either myself or by RAAVE.
6. I acknowledge that my foster care of this bird can be terminated by myself or RAAVE for any reason and at any time. I agree to give RAAVE reasonable notice if I wish to terminate my foster care so that a new foster home may be found.
7. **RELEASE:** I agree to release RAAVE and its Board of Directors, agents, and representatives from any liability relating in any way to my foster care of this bird. I acknowledge that there are risks involved in fostering a bird, and I agree to assume full responsibility for those risks, which include illness or injury to humans and pets or damage to property.

I acknowledge that I have read, fully understand, and accept the terms and conditions of this contract, and that I voluntarily enter into this contract.

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Foster Parent's Signature	Print Foster Parent's Name	Date
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Adopt A Bird Member Signature	Date
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Donor's Name \_\_\_\_\_

Revised 11/2002