

AGREEMENT FOR SERVICES AND CONSENT TO TEMPORARY CARE/CUSTODY

This Agreement for Services and Consent to Temporary Care/Custody (“Agreement”) is made this ____ day of _____ between _____ (“Permanent Guardian”) and Paws Between Homes (“PBH” or “Temporary Guardian”). Permanent Guardian is experiencing an unstable housing situation and desires to place Permanent Guardian’s pet(s) in the temporary care and custody of PBH, and PBH agrees to provide appropriate care for such pet(s). In consideration of the promises and the covenants herein contained, PBH and Permanent Guardian agree as follows:

Consent to Temporary Care/Custody

1. Permanent Guardian verifies that the pet(s) listed below belong to him or her. Permanent Guardian hereby delivers to PBH and PBH accepts from Permanent Guardian the pet(s) described below (list name, species, and breed of each animal):

2. Permanent Guardian confirms that Permanent Guardian has completed a Pet Information Page for each pet that Permanent Guardian delivers to PBH’s temporary care/custody, and that the Pet Information Page(s) contain all information about the pet(s) that may be necessary for PBH to determine how to best care for the pet(s). The Pet Information Page(s) are attached hereto as Exhibit A and are incorporated into this Agreement.
3. PBH agrees to take care of the pet(s) in its custody as described in this Agreement. Permanent Guardian hereby allows PBH and its volunteers, foster homes, agents, partners, and/or any entity partnering with or compensated by PBH to care for Permanent Guardian’s pet(s).
4. Pets may only be dropped off or picked up at a location agreed upon in advance by PBH.

Eligibility for PBH Assistance

5. Permanent Guardian confirms that (a) their current address falls within the zip codes of 30310, 30311, 30312, 30314, 30315, 30318, 30331 (circle one); (b) they currently have no viable housing options where they can bring their pet(s); and (c) they have provided PBH with a letter from a community organization confirming their housing instability, or the case number of a dispossessory pending against them.
6. PBH reserves the right to determine any pet unfit to receive services either at the outset or after the pet has entered the program. Reasons for this determination may include, but are not limited to, temperament and health issues.

7. **Permanent Guardian understands that PBH is not an adoption program. Permanent Guardian intends to reclaim their pet(s) within the time limit set forth below.**
8. Permanent Guardians may not use PBH services more than two (2) times in a three-year period.

Time Limit

9. PBH agrees to provide up to 90 days (the “Time Limit”) of pet housing and basic veterinary care to the pet(s) listed in this Agreement. PBH, in its sole discretion, will determine the duration of assistance provided. In no event shall PBH become obligated to keep the pet(s) for longer than the specified Time Limit.

Time Limit: _____ Permanent Guardian’s initials: _____ PBH initials: _____

10. PBH will notify Permanent Guardian by phone, email, or letter if Permanent Guardian is nearing the end of the Time Limit. The Time Limit may be extended only by the mutual written consent of Permanent Guardian and PBH.
11. **Once the Time Limit has expired, all pets are deemed relinquished by Permanent Guardian. Relinquished pet(s) may be put up for adoption, surrendered to animal control, or euthanized.** _____ *Initials of Permanent Guardian*
12. PBH reserves the right to terminate services and require Permanent Guardian to retrieve the pet(s) before the expiration of the Time Limit. If this occurs, PBH will make reasonable efforts to provide ample notice of termination to Permanent Guardian. However, if PBH terminates services and is unable, after reasonable efforts, to reach Permanent Guardian, the pet(s) will be considered relinquished.
13. Permanent Guardian has the right to reclaim custody of their pet(s) any time before the Time Limit expires.
14. Permanent Guardian agrees to reclaim Permanent Guardian’s pet(s) within 24 hours after moving into pet-friendly housing and securing all necessary landlord approval.
15. If Permanent Guardian decides to move out of the State of Georgia, Permanent Guardian must make arrangements with PBH to pick up their pet(s) before moving.

Pet Lodging

16. While the pet(s) are in PBH’s temporary care/custody, PBH reserves the right to determine where each pet is housed, including a boarding facility, foster home, or combination thereof. The boarding facility or foster home will retain physical custody of the pet(s). It is in PBH’s sole discretion whether or not to disclose the location of the pet to the Permanent Guardian.

17. PBH reserves the right to relocate any pet without first notifying Permanent Guardian.
18. All costs of pet lodging will be covered by PBH, unless otherwise specified in writing and signed by Permanent Guardian and PBH.

Veterinary Care

19. PBH will provide, at no cost to Permanent Guardian, only the following veterinary services (as needed): Vaccinations (Rabies, DHLPP, Bordetella, FVRCP); Feline Leukemia/FIV Test; Microchip; Wellness Exam; Spaying and Neutering. PBH reserves the right to select a veterinary facility of its choice.
20. Permanent Guardian authorizes all necessary medical procedures required for PBH assistance, which may include, but is not limited to, the following procedures: vaccinations, testing, treatment for internal and/or external parasites, treatment of illnesses or symptoms. Permanent Guardian grants PBH, and any vet in PBH's sole discretion, permission to perform any medical tests and procedures deemed necessary to identify any medical concern and maintain the pet's health.
21. Permanent Guardian understands that, if the pet has a known or unknown pre-existing health condition*, PBH will not be responsible for the treatment and possible cure of any disease or condition.

*Examples include, but are not limited to: parvo, heartworm, diabetes, cancer, abscesses, broken bones, lesions, burns, glaucoma, etc.
22. A PBH representative will contact Permanent Guardian in the event that a pet may require euthanasia. Reasons for euthanasia include severe injury or terminal illness.
23. If veterinary inspection indicates that a pet has been abused or neglected, PBH reserves the right to press charges against the abuser(s) under the Georgia Animal Protection Act, O.C.G.A. § 4-11-1.

Communication While Pet(s) Are in the Temporary Care/Custody of PBH

24. Even if Permanent Guardian knows the location of Permanent Guardian's pet(s), all communication with the foster home or boarding facility must go through a PBH representative.
25. PBH does not guarantee that Permanent Guardian will be able to visit Permanent Guardian's pet(s) during the period of time that the pet(s) are in PBH's temporary care/custody. However, PBH will make reasonable efforts to facilitate visits if Permanent Guardian so desires.
26. Permanent Guardians are required to maintain contact with a PBH representative on a weekly basis and to apprise PBH of any changes in housing status (such as a move, an approved application for an apartment, etc.) within 24 hours. PBH reserves the right to change the type

and amount of assistance offered to Permanent Guardian as a result of changes in Permanent Guardian’s status.

Legal Responsibilities

- 27. Permanent Guardian retains full responsibility for any and all damage or injury to person or property caused by the pet(s).
- 28. For and in consideration of PBH agreeing to provide temporary care of the pet(s), Permanent Guardian agrees that they will not hold PBH or its volunteers, representatives, or agents liable for anything that may happen to the pet(s), including but not limited to illness, disease, physical escape (loss), or death.
- 29. Any dispute arising out of or in connection with this Agreement shall be governed by the laws of Georgia.
- 30. This Agreement is the entire agreement of the parties, and there are no oral promises or representations made in addition hereto. This Agreement may only be changed in a writing signed by both PBH and Permanent Guardian. This Agreement shall continue in full force and effect until the expiration of the Time Limit or terminated by either party in writing.

Agreed to this ____ date of _____, 20__.

Permanent Guardian:

_____	_____	_____
Name (Print)	Signature	Date

Witness:

_____	_____	_____
Name (Print)	Signature	Date

Paws Between Homes representative:

_____	_____	_____
Name (Print)	Signature	Date

PET INFORMATION PAGE (Complete a separate page for each pet)

Name of Pet: _____ Color and Markings: _____
 Type of Pet: _____ Sex: _____
 Breed: _____ Spayed/Neutered: _____
 Weight: _____ Housetrained: _____
 Age: _____ Recent injuries: _____

The following are required to have been given within a year for pets receiving PBH services. If vaccinations are not up to date, PBH can assist with getting them prior to entering our program. PLEASE WRITE DATE OF LAST VACCINATION/TEST ON THE SPACE PROVIDED:

Cats: Leukemia/FIV _____ FVRCP _____ Rabies _____
 Has your cat been exposed to cats with questionable Leukemia/FIV status since last test? Y / N

Dogs: Bordatella _____ DHLPP _____ Rabies _____ Heartworm Test _____
 Date of last Heartworm Preventative _____ Date of last Flea Preventative _____

Is your pet microchipped? Y / N To whom is your pet registered?

Type of food pet is currently eating (Canned or dry? What brand & variety?)

Feeding schedule:

****NOTE: We cannot guarantee a pet will receive the same food/feeding schedule while in PBH care.**

If pet takes any medication, list type/dosage:

Please list any allergies (including food and medications):

Describe pet's temperament. Good with dogs? ___ Good with cats? ___ Good with kids? ___
 Has your pet been: Indoor/Outdoor ___ Indoor only ___ Outdoor only ___

(Dogs only) Is your dog: A chewer? ___ A fence jumper/digger? ___ Used to being crated? ___

My pet's veterinarian is: (Name, address, phone)

I do / do not (circle one) give permission to any veterinarian working with PBH to contact the above-listed vet to access the pet's medical records.

Anything else we should know about your pet:

PERMANENT GUARDIAN INFORMATION PAGE

Full Name

Household size: ____ Adults ____ Children

Phone number

Children's ages:

Alternate phone number

Are you a veteran:

Email address

Do you have a disability:

Current address

Do you have access to reliable transportation:

Gender

Employer:

Age

Household income:

Race/ethnicity

Emergency Contacts: ****In the event that you cannot be reached and your pets must be returned, PBH will attempt to return them to these people. PBH will contact the people listed below to confirm that they are able and willing to take your pets if needed.**

Name:

Relationship to Permanent Guardian:

Phone Number:

Email address:

Name:

Relationship to Permanent Guardian:

Phone Number:

Email address: