



Dog Behavior Release

Consult/Signed by any Friends of BCAS Foster Dog Coordinator

Consult/Signed by Friends of BCAS President or Vice President

Consult/Signed by any Friends of BCAS Volunteer Dog Trainer

Dog's Name/Description/Breed: _____ Date: _____

We cannot predict how _____ may act in the future. We have not checked the truthfulness of the statements, if any, made by the prior owner or other people. But, based on our current observations and information available to us _____ (insert opinion of behavior) _____. This is not an assurance or prediction of future behavior. Animals are unpredictable and may react differently to other people, animals, environments or homes. Foster Volunteers and/or Adopters should not rely on this opinion, but rather must perform their own inspection and make their own decision.

- Dates and Description of known incidents.

As the new foster volunteer or adopter, I understand the consequences of this type of behavior and I have been given the opportunity to ask any questions regarding the dog and to consult with my own animal behaviorist, veterinarian or anyone else of my choosing. I have had the ability to inspect the dog as much as I wanted.

I agree to foster and/or adopt this dog and to assume all responsibility and liability for this pet. I understand that I will be fully responsible for this pet including any claims, suits or costs of any damage or injury to people, other pets or property caused by this pet. I agree to indemnify the Friends of the Burlington County Animal Shelter for any claims, suits or costs of any damage or injury to people, other pets or property caused by this pet. I agree to return this pet to the Friends of the Burlington County Animal Shelter should I find that I am unable to keep this pet in my home. I hereby accept and acknowledge all terms of the "Release" contained in the Friends of the Burlington County Animal Shelter Foster and/or Adoption Agreement.

Foster Volunteer or Adopter's signature

Date

Witness signature

Date

Appropriate Friends of BCAS Signature (Checked Above)

Date