



Coastal Boxer Rescue of Florida

P.O. Box 121381 · W. Melbourne Fl. 32912-1381 · info@coastalboxers.org (866) 281-8209

Transfer of Custody Form/Foster Agreement

FOSTER INFORMATION

Your Name Last _____ First _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ Email Address _____

DOG INFORMATION

Dog Name _____ Dog # _____ Gender _____

Dog Color _____ Dog Age _____ Microchip # _____

This document will serve as proof that you are the custodian for the above dog until it finds its forever home. This document will also serve as an agreement between you, the foster home, and CBR that this dog will be placed according to the direction of the CBR Adoption Committee. Please call your Adoption Committee contact for any questions regarding the care and handling of this dog. Thank you for your help!

Your adoption committee contact is: _____

Phone Number _____ Email Address _____

FOSTER REPRESENTATIVE

Signature

Printed Name

CBR REPRESENTATIVE

Signature

Printed Name

SEND COMPLETED FORM TO:

Coastal Boxer Rescue of Florida

Attn: Melissa Mierzwa

3311 Taragon St

Cocoa, FL 32926