### **ADOPTION APPLICATION**

Name:					Date:	
Address:			(	Work Phone:		
			_ \	Home	Phone:	
E-Mail:			\\\	Cell	Phone:	
Driver License:	Ex	p:	^			
Your Household						
Please list family members	and other people who liv	e in your	ho <mark>usehold</mark> , i	ncluding room	nmates <mark>, stud</mark> ent	s, etc.
Name:	Age:	//	Name:		Age:	
Name:	Age:	//	Name:		Age:	
Name:	Age:	//	Name:	1	Age:	
The primary caregiver will be	oe:	- 1	_			)
Do all members of your hou	usehold favor having a h	ouse rabb	it?	☐ Yes	☐ No	☐ Undecided
Does any member of your I	nousehold have allergies	to animal	s or hay?	☐ Yes	☐ No	☐ Unknown
How many hours per day a	re y <mark>ou away from</mark> home?	?	Hours			
Please describe the level of	household activity:	Quiet	☐ Activ	/e		
Housing (check all that app	oly):				1	
☐ Own ☐ Rent	Live with parer	nts	☐ School	<b>ш</b> м	ilitary	
☐ House ☐ Condo	☐ Apar <mark>tm</mark> ent		☐ Mobile h	ome		
Landlord's Name:			Phor	ne Number:		
How long have you lived at	your present address?					
Do you anticipate moving in	n the next two years?			f so, when?		
Employer:			Phor	ne Number:	1	
Please give us two persona	I references from people	who can	attest to you	ır commitme <mark>n</mark>	t to your anima	ls:
1. Name:				Phone N	<mark>um</mark> ber:	
Relationship to you:						
2. Name:				Phone N	umber:	
Relationship to you:						
Who is your current vetering	narian?			Phone N	lumber:	
May we contact him or her	as a reference for you?		Yes	□ No	☐ I don't ha	ave a vet

### **Hopes and Expectations**

Why did you select a house rabbit for a companion?	
Have you had house rabbits before?	
Do you have a rabbit now?	
Are you looking for:  a single rabbit  a pair  a companion for your bunny	
Is there a specific rabbit in whom you are interested?	
Why are you interested in him or her?	
How long have you been thinking about and searching for a rabbit?	
Please describe the level of research you have done to date on rabbits and rabbit care:	
□ None yet	
Information from:  HRS Breeder Friend with rabbit experience House Rabb	<mark>it H</mark> andbook
Other books on rabbit care Preliminary internet research Extensive internet research	Pet store
□ Other:	
How long do you expect to have your new rabbit? years	
I must have  size:lbs  age: breed/color:	
a bunny I can hold a bunny who will sit in my lap	
a litter trained bunny an affectionate bunny an easy-going bunn	У
a confident bunny a kisser a curious bunny	•
a quiet bunny an active bunny a playful bunny	
other:	
<u> </u>	
I don't want size:lbs age: breed/color:	
a bunny I can't hold a bunny who won't sit in my lap	
☐ a messy bunny ☐ a chewer ☐ a digger	
lacksquare a shy or scared bunny $lacksquare$ a rambunctious bunny $lacksquare$ a big shedder	
other:	

#### **Pet History**

Please list all animals, including rabbits, currently in the household:					
1. Type: Age:		Sex:	Spayed/Neutered? 🔲 Yes	☐ No	
Kept: Inside Outside	<b>☐</b> Both	Ho	<mark>ow</mark> long has he/she been with you?		
Where did you get him/her?					
2. Type: Age:		Sex:	Spayed/Neutered?	☐ No	
	Both		ow long has he/she been with you?		
Where did you get him/her?					
3. Type: Age:		Sex:	Spayed/Neutered?	☐ No	
	Both	100	bw long has he/she been with you?	_	
Where did you get him/her?					
4. Type: Age:			Spayed/Neutered?  Ves	☐ No	
Kept: Inside Outside	_			_ 110	
Where did you get him/her?					
Please describe the animals, including rabbits	, no longer	in your hous	ehold:		
1. Type: Age:		Sex:	Spayed/Neutered?  Yes	☐ No	
Kept: Inside Outside			How long was he/she with you?		
Where did you get him/her?		_	What happened to him/her?		
2. Type: Age:		Sex:	Spayed/Neutered?  Yes	☐ No	
Kept: Inside U Outside	Both		How long was he/she with you?		
Where did you get him/her?		_	What happened to him/her?		
3. Type: Age:		Sex:	Spayed/Neutered?  Yes	☐ No	
Kept: Inside Outside	Both		How long was he/she with you?		
Where did you get him/her?	300-		What happened to him/her?		
4. Type: Age:		Sex:	Spayed/Neutered?	☐ No	
Kept: Inside Outside	Both		How long was he/she with you?		
Where did you get him/her?		_	What happened to him/her?		
Have you ever surrendered an animal to a sh	elter?	☐ Yes	□ No		
If so, please describe the circumstances: _					
Have you personally ever given away any of your pets?   Yes  No					
If so, please describe the circumstances:					

### **On-going Care**

If you currently have a rabbit or rabbits, please describe their current diet, including amounts and frequency of feedings:
What type of litter do you use? How often do you change the litterbox?
Please describe your new bunny's living conditions:
Living Space:
Location of living space:
Amount of play time per day: hours Amount of time with people per day: hours
How much money per month are you willing to budget to care for your rabbit? \$
Are you willing to take your rabbit to a vet for an annual checkup?
How much money are you willing to spend in a medical emergency for your rabbit? \$
When you leave home on vacations or business trips, how will you provide for your rabbit?
If you lose the rabbit, what will you do to find him or her?
What will you do if you can no longer care for your rabbit, such as if you lose your job or become sick?
What will you do in the event of a lifestyle change cuch as a incurring a new family member, working more hour
What will you do in the event of a lifestyle change, such as a incurring a new family member; working more hours getting a new pet; starting a new hobby; traveling more; or moving?
getting a new pet, starting a new hobby, traveling more, or moving:
Your comments or questions:
I hereby certify that all the information on this application is true, and I understand that false information may void th
application and any future applications. I also understand that failure to comply with future requirements, such a
spaying or neutering, could result in my inability to adopt more animals from this organization.
Signature: Date:

Adopter Name:	Ra	abbit(s) Name(s):		
For Staff/Supervisor Use Only Approved Topics reviewed with adopter:				
☐ spay/neuter	☐ litterbox training			
bunny proofing	destructive behavior	veterinary care		
age requirements	bonding	expectations		
feeding requirements	grooming			
Adoption finalized?	☐ No: Why not?			
Staff/Supervisor's Name:		Date:		
Adoption Follow-up Comments:				
Actions Necessary:				
Staff/Supervisor's Name:		Date:		
☐ Denied				
Reason for denial:				
Comments:				
Staff/Supervisor's Name:		Date:		