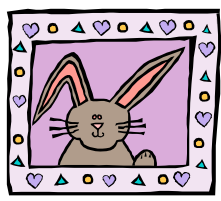


**Rabbit Adoption Application**

**Rabbit Name** \_\_\_\_\_

**Humane Society of Jefferson County, Inc.**



**Application Procedure**

We request the following information in an attempt to assist you with the selection of your companion animal. The animal's welfare is our foremost consideration. This process is designed to help us determine if the placement is in the animal's best interest and to assist you in finding an animal best suited to your lifestyle. H.S.J.C. reserves the right to refuse an adoption to anyone for any reason. No animal will be adopted to prospective owners who mislead or fail to provide accurate information on this application.

**Please read the following information carefully.**

1. Fill out the application completely. Identification is required to verify information.
2. We do not do same day adoptions.
3. Every effort will be made to review the application in a timely manner. HSJC staff will notify you when the process has been completed and inform you of our decision.
4. Once an application has been approved it will remain on file for 6 months.
5. All family members must meet the new companion animal before adoption to ensure compatibility.

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Birth date:** \_\_\_\_\_ **Drivers license #** \_\_\_\_\_ **State issued** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **County** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**How long have you lived at this address?** \_\_\_\_\_

**If there is a specific rabbit you are interested in? What is the name of the pet?** \_\_\_\_\_

**Pre-approve (pet selection not yet made)    Yes    /    No**

**Type of residence**

Circle one:    House            Apartment            Duplex            Mobile Home    Farm  
                  Live with friend/relative    Condo            Other\_\_\_\_\_

If you rent, lease or own a condo or trailer please provide the following information:

Landlord or Condo association: \_\_\_\_\_

Daytime phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_

Are you planning to move within the next 6 months? \_\_\_\_\_

**Veterinary Information(for owned and previously owned pets)**

Clinic name: \_\_\_\_\_

Phone: \_\_\_\_\_

If you do not currently have a veterinarian, you will be asked to obtain one before the adoption is finalized.

**Please list the pets you currently own and pets you have owned in the past 5 years:**

<u>Species</u>	<u>Name</u>	<u>Age</u>	<u>Neutered?</u>	<u>Still own?</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Are the pets you now own current on vaccinations?    Yes / No

Are vaccination records under name listed on application?    Yes / No

If you no longer own the pet, what happened to it?

\_\_\_\_\_

Have you ever adopted from a shelter before? Yes / No When? \_\_\_\_\_

What kind of pet? \_\_\_\_\_

Have you ever surrendered an animal to a shelter? Yes / No When? \_\_\_\_\_

Why? \_\_\_\_\_

**What is your past experience with rabbits? Please circle.**

First time owner

Current rabbit owner

Had a rabbit in the past

**How will you correct behavior problems in your rabbit if they occur?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How much \$ do you plan to spend per year to care for your rabbit? \_\_\_\_\_

Approximately how many hours a day will your rabbit be without human companionship? \_\_\_\_

Are you a frequent traveler? Yes / No

Who will care for your rabbit while you are away? \_\_\_\_\_

Where will you keep the rabbit during the day? \_\_\_\_\_

Where will you keep the rabbit during the night? \_\_\_\_\_

Are you willing and able to assume the financial responsibilities of pet ownership? Yes / No

Are you prepared to commit to caring for your new rabbit for the next 10 years? Yes / No

If you must move from your current place of residence what will you do with your pet?

\_\_\_\_\_

Will you allow your rabbit adequate time to adjust to a new home? Yes / No

How long? \_\_\_\_\_

Are you aware of routine veterinary care recommended for the health of your rabbit? Yes / No

**Please tell us a little about your household**

**What is the activity level of your household? Please circle.**

**Quiet      Active      Moderate activity**

**# of Children and ages \_\_\_\_\_ Adults \_\_\_\_\_**

**Who will be the primary caretaker? \_\_\_\_\_**

**This rabbit is being adopted as:      Please circle all that apply.**

**House rabbit      Outside rabbit      Gift      Companion      For a Child  
Companion for another rabbit      Hutch Rabbit      Breeding**

**Does anyone residing in the house have any known pet allergies?      Yes / No**

**Do you understand that all adopted rabbits must be spayed/neutered?      Yes / No**

**Do you plan to allow your rabbit outdoors unattended?      Yes / No**

**Circle items you would like more information about.**

**Litter box training      Rabbit/Rabbit Introductions      Dog/Cat Introductions      Rabbits and Children  
Spaying/Neutering      Training Methods      Proper diet**

**How did you learn about our organization? Please circle.**

**Pets of the Week      Friend/Relative      Phone Book      Veterinarian  
Radio      Special Event      Other \_\_\_\_\_**

**Release:**

By submitting this document, you are stating that all the information given herein is accurate and complete and that you are hereby giving your consent for The Humane Society of Jefferson County to verify any and all information contained herein. The completion of this form does not entitle you to any guarantees or rights. HSJC will not be held liable in any way, for any animal, or its actions, once the animal has been placed.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Received: Staff Initials \_\_\_\_\_ Date/Time: \_\_\_\_\_

**Office Use Only**

*Veterinary check* \_\_\_\_\_ *Landlord approval* \_\_\_\_\_

*Home ownership verified* \_\_\_\_\_ *Pets licensed* \_\_\_\_\_

*Approved* \_\_\_\_\_ *Denied* \_\_\_\_\_ *Pending* \_\_\_\_\_

*Adopter notified* \_\_\_\_\_

**Notes:**

*Include all correspondence relating to adoption. Please date and initial.*

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