

Bunnies Matter Rescue

Bunniesmatter.org

Bunny Name(s) _____

Adoption/ Foster to Adopt Application & Contract.

Form of Payment/Amount _____/_____

OUR PURPOSE is to promote the welfare of domestic rabbits.

OUR GOALS ARE: To help educate the public about the physical and social needs of domestic rabbits, to help reduce the rabbit overpopulation by promoting spay and neuters and to help promote the adoption of rescued rabbits by us, shelters, and other rescue groups we work with into loving homes.

PLEASE PRINT AS NEAT AND CLEAR AS YOU CAN. WE USE THIS INFO TO TRANSFER THE CHIP INFO TO YOU.

Name _____

Address _____

City _____ State _____ Zip _____

Cell Phone _____ Work Phone _____

E-mail _____

Emergency contact and phone number: _____

Do you realize that bunnies live 10 – 12 years and you are prepared for this commitment? YES NO

Are you willing to educate yourself on the proper care of rabbits (New rabbit Adoptions)? YES NO

Do you have other animals? YES NO

If YES, what types & how many? DOG _____ TYPE _____ CAT _____ OTHER _____

How many of each in your household? Adults: ____ Children: ____ Children's ages: _____

Who will be the primary guardian of the rabbit(s)? _____

Is anyone in your family allergic to rabbits or hay? _____

Do you currently own or rent? OWN RENT

If you rent, what pets does your landlord allow? _____

Do you need assistance in planning the rabbit(s) housing? YES NO

Do you plan on housing the rabbit(s) outside? YES NO

Do you have any specific questions about bunnies that you need us to explain to you?

