



Heartland Rabbit Rescue Adoption Questionnaire

Name: _____

Address: _____

Phone number: _____

Have you adopted from us before?

Yes

No

If Yes, explain: _____

I am looking for...

A single bunny

A bonded pair

I am interested the bunny named: _____

This adoption is for

Myself

My child

As a gift

This bunny will live mostly

Inside

Outside

Both

Please estimate the amount of time

Inside _____%

Outdoor _____%

Garage _____%

Other _____%

How long will the bunny be alone each day?

_____ hours

When alone, where will the bunny stay?

Please list your current pets:

Rabbits

How many? _____

Dogs

How many? _____

Cats

How many? _____

Birds

How many? _____

Reptiles

How many? _____

Other

How many? _____

Of your pets how many live:

Inside _____

Outside _____

How many of your pets are spayed/neutered?

Have you had pets in the past?

Yes

No

What became of them?

Are you willing to pay for veterinary care if this rabbit becomes sick or injured?

Yes

No

Are you willing to ensure this bunny receives yearly veterinarian check-ups?

Yes

No

Would you object to a home visit by one of our volunteers?

Yes

No

I/we Rent Own a...

House

Condo

Mobile Home

Apartment

Other

How long? _____

Has your Landlord or Home Owners Association given permission for a rabbit to reside with you?

Yes

Name: _____

Pet deposit required

Phone: _____

No

N/A

Are you planning to move in the next few years?

Yes

No

If yes, what will become of the bunny?

How many people reside in your home?

Adults _____

Children _____

Ages: _____

Who will be the bunny's primary care giver?

Name: _____

How will this bunny be cared for when you or the primary care giver are out of town?

Is anyone in your home allergic to animals?

Yes

No

What will you do if someone becomes allergic to this rabbit?

Rabbits will eat plants on chew on just about everything. What precautions are you willing to take to protect this bunny and your home?

Rabbits need daily exercise. When and where will the bunny be able to get its exercise?

What kind of rabbit behavior do you feel that you CAN NOT tolerate?

Under what circumstances would you NOT be able to keep this rabbit?

Would you like a veterinarian referral?

Yes

No

Would you like info on caring for rabbits?

Yes

No

Would you be interested in volunteer work?

Yes

No

How did you hear about our organization?

Please return completed questionnaire to:
Heartland Rabbit Rescue
PO Box 224, Blanchard, OK 73010

Or you can submit it by email @ heartlandrabbitrescue@yahoo.com