

Piquard's Rabbitry Adoption Application Form

| First Name: * | Last Name: * | Email: * | |
|---|-----------------------------|--------------------------------|------------|
| City: * State: * | | Phone Number: * | |
| What purpose are you looking for your 4H or Teaching)? * | r rabbit to serve (Family o | or Personal Pet, Breeding, The | rapy, Show |
| Pedigreed? * Yes No | | | |
| Do you prefer male or female? * ☐ Male ☐ Female | | | |
| How long have you been looking for a ra ☐ 1 to 2-Weeks ☐ 2 to 3-weeks Are you willing to wait longer? * ☐ Yes ☐ No How Long? * | | □ Longer | |
| | 2.01 | | |
| How familiar are you with rabbit's and t | neir care? (Please summa | arize.) * | |
| What characteristics are you looking for | in a rabbit? (Please sumi | marize.) * | |
| | | | |

| Do you have any indoor pets? * |
|--|
| □ Yes □ No |
| □ No If yes, please list species (example –rabbit, dog, etc.). * |
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| How do you plan to house your rabbit? * □ Indoor |
| □ Indoor □ Outdoor |
| |
| Is everyone in your household happy about getting a new pet? * |
| My rabbits are litter trained, however when they move to a new home expect a period of time where this training needs to be reinforced due to their new surroundings. Are you willing to continue with this training? * Yes No |
| Rabbits mature at a quick rate. In just a few weeks after you adopt your rabbit, they will be teenagers. Do you have plans made to spay or neuter them before they reach adulthood? * Yes No |
| Do you have children? If so please tell me their ages. * |
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| From the time that they are born we handle our kits daily. Rabbits are prey animals so sometimes no |
| matter how much you interact with a rabbit, they are still uncomfortable with being picked up. Are you willing to interact with the rabbit on floor level? Please explain. * |
| <u> </u> |
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| |
| Have you ever had allergies? * □ Yes |
| □ res □ No |
| |
| Are you familiar with how to groom a rabbit? * □ Yes |
| □ No |
| |
| |

| Overtions or comments. | |
|---|--|
| Questions or comments: | |
| | |
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| | |
| Are you familiar with my sales polic \square Yes \square No | cies and guarantees? Do you agree with my terms? * |
| Signature (type your name): * | Date: * |
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