



Foster Application

Thank you for filling out this questionnaire. The information you provide will help us help you find a rabbit who best fits with you and your family. Feel free to expand on any issue or ask any questions in the *comments* section at the end. We welcome your feedback and suggestions!

VOLUNTEER INFORMATION

First Name: _____ Last Name: _____
Drivers License #: _____ Phone Number: _____
Email: _____
Address: _____
City: _____ State: _____ Zip Code: _____

FOSTER HOUSEHOLD INFORMATION

How many animals live in your home?

Name: _____ Species: _____
Name: _____ Species: _____
Name: _____ Species: _____

How many members of the household: _____ are there and what are their ages?

Name: _____ Age: _____ Name: _____ Age: _____
Name: _____ Age: _____ Name: _____ Age: _____
Name: _____ Age: _____ Name: _____ Age: _____

Will the rabbit be interacting with children? Yes _____ No _____

Is anyone in your household allergic to rabbits or hay? Yes _____ No _____ Unknown _____

Does everyone in your household agree to having a rabbit? Yes _____ No _____

Do you rent or own your home? Rent _____ Own _____

If you rent, please list landlord contact info: _____

Please provide three references (Name, Relationship, Phone/Email):

What type of living space will your foster rabbit have?

Where will your foster rabbit's living space be located?

How many hours per day will you, or other people in your home, spend with your foster rabbit?

Do we have permission to contact your current vet to ensure all resident pets are up-to-date on vaccines and well cared for? Yes___ No___

Vet Information:

Name: _____ Phone Number: _____
Email: _____ City: _____ State: _____

How many rabbits are you willing to foster at any given time? Please keep in mind you will be spending time, cleaning, feeding, and playing with each bunny. Each foster rabbit requires a minimum 3 hopping distances in a crate/pen and must be kept separate from other rabbits. (Pens and supplies will be provided by The Fluffle House)

Do you have a separate room/space to keep your foster rabbit(s) away from the other household pets when you are not home? Yes___ No___

Are you willing to take your foster rabbit(s) to vet appointments, including drop-off and pick-up for spaying/neutering? Yes___ No___

Are you willing to take your foster rabbit(s) to outreach and adoption events hosted by The Fluffle House, as needed? Yes___ No___

VOLUNTEER APPLICATION AGREEMENT:

I understand that I will not be paid for my services as a volunteer. In consideration of The Fluffle House accepting my application to be a volunteer, I agree to release and hold harmless The Fluffle House from and against any and all loss, damage, claims, liability, costs and expenses of any nature whatsoever, including without limitation, attorney's fees and disbursements, arising from or occasioned by my participation in The Fluffle House programs. Initial_____

I understand there are certain risks inherent in handling animals and I accept these risks. Initial_____

I agree that The Fluffle House may photograph my participation in this program and I hereby release any such photographs to The Fluffle House for use in its programs, publications and purpose. Initial_____

Signature:_____ Date:_____