

**WELCOME TO THE ULSTER COUNTY SOCIETY FOR THE PREVENTION
OF CRUELTY TO ANIMALS**

IN ORDER TO BE CONSIDERED AS AN ADOPTER TODAY YOU MUST:

** BE 21 YEARS OF AGE*

** HAVE IDENTIFICATION SHOWING YOUR CURRENT ADDRESS*

** BE ABLE AND WILLING TO SPEND THE TIME AND THE MONEY NECESSARY TO PROVIDE TRAINING,
MEDICAL TREATMENT AND PROPER CARE OF A PET.*

THE SPCA RESERVES THE RIGHT TO REFUSE ADOPTION TO ANYONE

The following information is requested so that your adoption counselor can assist you in the selection of a new pet. The animal's welfare is our foremost consideration. The consultation process is designed to help us determine if the adoption is in the animal's best interest and to assist you in finding an animal most compatible with your lifestyle.

The animals available for adoption came here from a variety of sources. All animals are examined upon entry, and their health is routinely monitored while at the shelter, but there is always a chance that an animal is incubating a disease without showing any clinical signs. So the U.C.S.P.C.A. cannot guarantee the health of any animal adopted from the shelter. The adopted animal has to be examined by a licensed veterinarian within 10 days of adoption. If upon such examination, it is determined that the health of the animal is not satisfactory, it is understood that I may, upon the return of said animal to the U.C.S.P.C.A., within 14 days from date of adoption, receive a refund of all monies paid to the U.C.S.P.C.A. under this contract excluding licensing fees.

The U.C.S.P.C.A. makes no claims or representations as to the temperament, health or mental disposition of the animal adopted. The Ulster County SPCA is not responsible for any medical bills incurred from a private veterinarian and will not reimburse veterinary fees.

Our adoption fee includes: Vet health checks, fecal exam for parasites when necessary, as well as daily care and housing of the rabbits. This establishment reserves every right to follow up on all adoptions.

Please read the above and sign: _____ Date: _____

Name: _____

Home # _____ Work # _____ Cell # _____

Address: _____ City: _____ Zip: _____

PLEASE READ AND RESPOND TO THE QUESTIONS ON THE FOLLOWING PAGE CAREFULLY.
YOUR ANSWERS ARE USED TO COUNCIL YOU TOWARDS AN APPROPRIATE PET. DURING THE
INTERVIEW PROCESS THE ANSWERS YOU HAVE WRITTEN ON YOUR APPLICATION WILL NOT BE
SUBJECT TO CHANGE.

UCSPCA RABBIT ADOPTION APPLICATION

1. Why do you want a rabbit? _____
2. Do you own your own home? YES / NO Do you rent your home/apt.? YES / NO
3. If you rent, landlords name: _____ Phone # _____
4. How many adults live in the house? _____ How many children? _____ Children's ages ___/___/___
5. Working hours for each adult? From _____ to _____. From _____ to _____.
6. Will the rabbit be primarily kept indoors or outdoors? _____
7. Is anyone in the home allergic to rabbits? YES / NO If YES, explain: _____

8. Do you have additional pets at home? YES / NO
If YES, please list below (Please include their name/breed/age/sex):
_____ Spayed / Neutered / Up to date on all vaccines
_____ Spayed / Neutered / Up to date on all vaccines
_____ Spayed / Neutered / Up to date on all vaccines
_____ Spayed / Neutered / Up to date on all vaccines

**FOR APPROVAL ALL OTHER PETS MUST BE SPAYED OR NEUTERED
AND UP-TO-DATE ON VACCINES**

9. If applicable, list your current veterinarian: _____ Phone# _____
10. Have you had pets in the past? YES / NO If YES, what? _____
Where are they now? _____
11. If deceased, please give reason: Illness _____ Accident _____ Old Age _____
12. Do you understand that the average rabbit lives 7 years or more? YES / NO
13. Are you willing to provide a home for your rabbit for its lifetime including situations that may require relocating? YES / NO
14. Are you currently employed or financially prepared to give your rabbit the yearly and emergency medical care it may require? YES / NO
15. Your current occupation and employer? _____
16. Have you ever surrendered an animal to a shelter? YES / NO If yes, what? _____
When? _____ For what reason? _____
17. Have you ever been convicted of a felony? YES / NO
If YES, please explain: _____

NAMES OF REFERENCES	CITY/STATE	PHONE#
1. _____		
2. _____		
3. _____		

I certify the above information is accurate and complete to the best of my knowledge. I understand that the U.C.S.P.C.A. has the right to reclaim the animal if any given information is found to be false. I authorize the release of veterinarian information related to my past and current pets. I give the U.C.S.P.C.A permission to contact the persons listed above for a character reference.

Signed (not valid without signature) _____