



Jennifer Lowe
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binkybunnytalesrescue.com

FOSTER CONTRACT

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Age: _____

Phone Numbers: Home: _____ Mobile: _____ Work: _____

E-Mail Address: _____

Why are you interested in fostering a rabbit?

Please let us know what types of foster care you would be interesting in providing:

_____ Socializing Rabbits _____ Sick/Recovering Rabbits
_____ Bottle-Fed Rabbits _____ Sick/Recovering Rabbits Requiring Medication

Would you be willing to administer medication to your foster rabbit, if needed? _____

If yes, are you comfortable administering medication: Orally? _____ Topically? _____ Via Injection? _____

How many rabbits are you interested in fostering at one time? _____

What is the maximum length of time you are willing to foster a rabbit? _____

Household Information

Do you own, rent or lease your home? _____ Do you have your landlord's permission to keep a rabbit? _____

*If renting, do you have a letter of permission from your landlord to verify you are allowed to keep a rabbit?

Please list the name and relationship to you of each member of your household please include ages if under 21. (i.e. James, spouse, over 21. Kendra, roommate, 19.)

Does anyone in your household have allergies? _____ If yes, please describe:

Is everyone in your household comfortable with fostering a rabbit? _____

Has anyone in your household ever been convicted of domestic, child or animal abuse? _____

Do you currently have any animal companions? _____ If yes, please complete the information below:

Name	Species/Breed	Age	Sex	Altered Indoor, Outdoor or Both?
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Would you be able to foster rabbits separate from your own pets if necessary? Yes: _____ No: _____

Rabbit Experience and Care

Have you fostered rabbits/animals before? _____ If yes, describe:

Have you cared for a rabbit before? _____

What type of housing do you plan on providing for your foster rabbit?

How much time do you anticipate being able to spend with and care for your foster rabbit? _____

Are you aware of what signs to look for when a rabbit is feeling unwell? _____ If yes, please describe:

Do you have any experience dealing with sick or injured rabbits/animals? _____ If yes, please describe:

References

Do you have any objections to BINKY BUNNY-TALES visiting your home? _____

Please list two personal character references:

Name	Address	Phone Number
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_____	_____	_____
_____	_____	_____

Do you have any questions or additional comments you would like to add?

I certify that the information above is true and correct to the best of my knowledge.

Signature: _____ Date: _____