APPLICATION FOR RE-HOMING RABBITS

Assisi Homing Programme
Welcome to the Assisi Animal Sanctuary Re-Homing programme. To help you in the selection of your new pet and to help us match you with one of our animals we ask that you complete the attached form. This form, together with consultation, is designed to help you find an animal which is most compatible with your lifestyle.
To be considered you must-
• Be 18 years of age or older
• Have identification showing your present home address.
Completion of this application does not guarantee that an Assisi animal will be re-homed to you.

Rabbit History
• All rabbits available for re-homing have been examined by a veterinary surgeon. The approximate age stated is a reasonable estimate, based on the appearance and condition of the rabbit.
• The vast majority of these animals are, to the best of our knowledge, in good health and free from any physical defect or infirmity. Whilst every precaution is taken to ensure the health of every animal in our care, Assisi Animal Sanctuary cannot guarantee the health and temperament of each rabbit and no warranty in respect of any rabbit can be given to you.
• You will be informed of any known illness or history of behavioural difficulties.
• All adult rabbits leaving the Sanctuary will be vaccinated / spayed / neutered. If the animal is too young to be spayed / neutered before it leaves the Sanctuary it is your responsibility as the new owner to take the rabbit to the vets to be neutered once it is of an appropriate age.

Our Fees
The cost of providing neutering/ spaying, vaccinations, routine veterinary care and day to day care costs would be in excess of £200 if you were paying a vet’s fees for the treatment.
We charge a rehoming fee £30 per rabbit.
To help us meet our increasing costs we would greatly welcome any further donations on top of the rehoming fee.
If you are taxpayer you can also complete a Gift Aid form. For every £1 you donate we can reclaim a further 25p from the taxman!

Benefits
Each rabbit has 4 free weeks insurance cover with Petplan. The insurance cover is available from 6 weeks of age and covers your pet for veterinary fees up to £4000 after the excess of the first £50.
Each rabbit will have both its VHD and Myxomatosis vaccines.
Each adult rabbit will have been spayed / neutered before leaving the Sanctuary.

Your Commitment
If you are accepted to re-home a rabbit:
You will assume full proprietary rights over the animal and will have legal responsibility for any injury, loss or damage sustained by or to a third party caused by the animal.
You will permit an Assisi Home Visitor access to the rabbit/ from time to time to check on its welfare.

Follow Up Advice
Assisi is always available for free follow-up advice on request
Contact: 028 9181 2622 Email: ruth@assisi-ni.org Web: www.assisi-ni.org
APPLICATION TO ADOPT RABBITS

OFFICE USE

Name of Rabbit(s): ____________________________________________________________

Reference Number(s): ________________________________________________________

APPLICANT INFORMATION (Please print in BLOCK capitals)

Applicant 1: _______________________________ Applicant 2: _______________________________

Applicant 3: _______________________________ Applicant 4: _______________________________

Address: ______________________________________________________________________

Postcode: ___________________ Tel No. Home: ___________________________ Mobile: _______________

Email Address: ________________________________

GENERAL INFORMATION

How many adults are in the home? _______ How many Children? _______ Ages of Children: ____________

Does any member of the household have any allergies? ________________________________

Is the arrival of a baby imminent in your home? _______________________________________

Has the acceptance of a new pet been agreed by all household members? YES / NO

What arrangements will be made for the animal when you go on holiday? _________________

Are you willing to have a home visitor call to see where the animal will be living? YES / NO

Are you willing to give a home visitor access to check on the animals’ welfare after it has been re-homed to you? YES / NO

Have you ever applied to rehome an animal from Assisi before? YES / NO

Are you willing to take responsibility for this animal for the next 10 YEARS or more? YES / NO

ASSISI ANIMAL SANCTUARY

1 Old Bangor Road
Conlig
Newtownards
BT23 7PU

E-mail: info@assisi-ni.org
ruth@assisi-ni.org

APPLICATION TO ADOPT RABBITS
VETERINARY INFORMATION

With which vet(s) have you been registered to within the last 5 years? ______________________________________

**Please provide previous address/maiden name if applicable**

With which vet do you intend to register your new animals to? ______________________________________

**PLEASE NOTE ALL ADULTS IN THE HOUSEHOLD WHO HAVE OWNED PETS IN THE LAST 5 YEARS MUST COMPLETE A VET REFERENCE FORM WITH RECEIPT**

Would you be willing to adopt a rabbit with known medical issues? Y N

HOME DETAILS

Please circle: Is your property – owned / council / landlord / other ______________________________________

Will you take the animal with you if you move house? YES / NO

RABBIT DETAILS

Rabbits are social animals that enjoy the company of their own kind. We at Assisi Animal Sanctuary do not re-home Rabbits to live on their own. Are you looking to adopt:

- An established pair/group of Rabbits? OFF
  
  If yes, have you previously owned Rabbits? YES / NO

  OR

- A single Rabbit to bond with your current Rabbit/s? OFF
  
  If yes, please list details of your current Rabbit/s:

  1. Male / Female Neutered: YES/NO Vaccinated? YES/NO Breed: _______ _______ Age: _____
  2. Male / Female Neutered: YES/NO Vaccinated? YES/NO Breed: _______ _______ Age: _____
  3. Male / Female Neutered: YES/NO Vaccinated? YES/NO Breed: _______ _______ Age: _____

ACCOMODATION DETAILS

Rabbits need room to express natural behaviours and remain healthy. Do you intend to keep your animal/s:

- Indoors YES/NO How much space will you give them? ______________________________________

- Outdoors YES/NO Can you provide these minimum requirements?:

  - Hutch/Shed of at least 6 x 2 x 2 ft
  - Constant access to an enclosure of at least 10 x 6.5 x 3 ft
  - Access to a secure garden under supervision

Before your application is approved, the Small Animals Re-homing Manager must approve your rabbits’ accommodation via photos clearly showing their accommodation. Please e-mail photos to ruth@assisi-ni.org
APPLICANTS DECLARATION

☐ I am willing to allow Assisi Animal Sanctuary home visitor into my house to see where the animal will be living and to check any information I have provided in my application.

☐ I am willing to allow Assisi Animal Sanctuary home visitor access to the animal after it has been rehomed to check on its welfare.

☐ I give permission for Assisi to contact my vet for a reference.

☐ I give permission for Assisi Animal Sanctuary to contact my landlord.

Landlord/Agents name and contact details: ________________________________

☐ I understand that this application cannot be completed until I have provided these details

☐ I understand that I am under no obligation to proceed with my application and can cancel at any time.

☐ I understand that all members of the family that will be responsible for the care of this animal must meet the animal and sign the declaration. I understand that without these signatures my application cannot be completed.

☐ I am over 18 years of age

☐ The information I have provided in support of my application is to the best of my knowledge true and correct, I understand that if my application is successful and the information I have provided is discovered to be false, Assisi Animal Sanctuary reserve the right to remove the animal without notice.

Data Protection:

Assisi has a legitimate interest in keeping in touch with you with regard to the animal rehomed to you.

We would also like to keep you informed by letter, email and by phone about volunteering opportunities and the ongoing work of The Sanctuary that we believe may be of interest to you. Are you happy for us to do this? YES/NO

Occasionally we like to keep in touch with our volunteers and supporters by telephone including mobile messaging. Are you happy for us to contact you in this way? YES/NO

Occasionally we like to keep in touch with our supporters by email. Are you happy for us to contact you this way? YES/NO

We may occasionally allow other carefully selected organisations to write to our supporters. Do you wish to be included in this? YES/NO

Our Privacy Statement on how we handle and store your personal data can be viewed on line at www.assisi-ni.org or may be requested from the Sanctuary, 1 Old Bangor Road, Conlig, Newtownards, BT23 7PU. Charity ref # NIC 1045

SIGNATURES

This form must be signed by all adults living within the household.

1st Applicant: Date:

2nd Applicant: Date:

3rd Applicant: Date:

4th Applicant: Date:
<table>
<thead>
<tr>
<th>OFFICE USE</th>
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<tbody>
<tr>
<td>STAFF NAME ___________________ DATE ___________________</td>
</tr>
<tr>
<td>RABBIT(s) NAME(s) ___________________</td>
</tr>
<tr>
<td>REF NO(s) ___________________</td>
</tr>
<tr>
<td>AGE(s) ___________________</td>
</tr>
<tr>
<td>BREED(s)/COLOURS(s) ___________________</td>
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</tbody>
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**INFORMATION ABOUT THE ANIMAL(s)**

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

Applicant name: ___________________  Contact Number(s): ___________________

Animal name: ___________________  Reference number: ___________________

Application interview successful: Yes [ ]  proceed to next stage

No [ ]  Notified (date)

By

Reason

Vet references (Please ensure one is done for each applicant who has owned a pet in the last 5 years)

Applicant 1: Yes [ ]  No [ ]  Comment: ___________________

Applicant 2: Yes [ ]  No [ ]  Comment: ___________________

Applicant 3: Yes [ ]  No [ ]  Comment: ___________________

Applicant 4: Yes [ ]  No [ ]  Comment: ___________________

Landlord references: Yes [ ]  No [ ]  Comment: ___________________

Visuals of accommodation received: Yes [ ]  No [ ]  Comment: ___________________

Applicant successful: Yes [ ]  collection date/time

No [ ]  Applicant contacted by: