

FURRY FERRET RESCUE  
ADOPTION APPLICATION

Ferret Name(s)\_\_\_\_\_

Name\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

Home Phone\_\_\_\_\_ Cell\_\_\_\_\_

Email Address\_\_\_\_\_

Occupation\_\_\_\_\_

Do you own, rent or live with parents? \_\_\_\_\_

(if you rent does your landlord allow ferrets?)\_\_\_\_\_

If yes please provide landlord's Name, Address and phone number

\_\_\_\_\_  
\_\_\_\_\_

Do you have children? Yes / No Ages?\_\_\_\_\_

Are you willing to ferret proof your home which includes covering holes, making sure they can not reach any wires or cords and cover up any space under cabinets and appliances? Yes / No

Are you prepared to provide the highest quality ferret food available on the market? Yes / No

Are you willing to let a Furry volunteer into your home to see where and how the ferret will live and be housed? Yes / No (if no, why?) \_\_\_\_\_

Are you and your family prepared to make a lifelong commitment to owning a ferret(s)(Ferrets live 6 to 9 years) This includes lifestyle changes such as children going off to college, having a baby, moving to a new place, new pet, etc..... Yes / No

Do you own ferrets now? Yes / No How Many? \_\_\_\_\_

What kind of food do you feed them? \_\_\_\_\_

Do you have any other pets in the household? Yes / No

What kind? \_\_\_\_\_ Ages? \_\_\_\_\_

When was the last time they went to the vet and the reason? \_\_\_\_\_

Vets Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Who will be the main care giver to this ferret(s)? \_\_\_\_\_ Age? \_\_\_\_\_

Does anyone in your household have pet allergies? Yes / No To What? \_\_\_\_\_

If you would have to go out of town what would you do with your ferrets? Leave in cage, free roam, or get a pet sitter? \_\_\_\_\_

How much out of cage time can you offer? \_\_\_\_\_

You may choose to use a cage for your ferrets to spend time in while you are not home. Your ferret will need a min. of 4 hours each day out of their cage with interactive play time. Have you considered these things and are willing to provide a nurturing environment for your ferret(s) ?  
Yes / No

Do you have a cage setup and ready for the ferret(s) to come home? Yes / No

Do you need a cage? Yes / No

Have you researched about ferrets? Yes / No If so, how \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Would you like to receive more information on the following?

Volunteering Y / N

Membership Y / N

Fund Raising Y / N

Merchandise for sale Y / N

Fostering (must be a furry member) Y / N

Sponsoring a permanent foster ferret (Monthly donation through PayPal) Y / N

I have read and completed this application as honest and truthful to the best of my ability.  
This application is not a guarantee that you will be able to adopt from us. If approved we will contact you with in 5 days of completion.

Signature \_\_\_\_\_ Date \_\_\_\_\_

FURRY Ferret Rescue  
7301 Watson Rd PMB 170  
Webster Groves, MO 63119

(314) 608-0370