

Mobile ANT Request Form



2-week lead time is requested if possible – submission of form does not guarantee request.

Please complete the form below and return it to ANT by fax or email

Phone/Fax: (360) 671-3509 // Email: office@animalsasnaturaltherapy.org

Requesting Organization Name: _____

Address: _____

Contact Person Name: _____

Phone: _____ E-mail _____

Therapy Animals available – please select:

- Small Animals (combination of dogs, rabbits, & chickens): \$100/hour
- 3 Miniature Horses + Small Animals: \$200/hour

Is there a large room or outdoor space where interaction with animals will occur? If indoors, can we go room to room? (Please provide approx. dimension of room/space if applicable)

Is there carpeting? _____

Number of participants to be involved: # of Adults: _____ # of Children: _____

Type of participants: _____

Frequency of visits desired: _____

Days(s), time(s) preferred: _____

Are there any special requests?

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