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|----------------------------|--------------------------|
| Rabbit History Form | Date: |
| | Time of arrival: |
| | Person filling out form: |

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|-----------------|--------|------|------|-------------------|
| Name of animal: | Breed: | Sex: | Age: | Owner /Caregiver: |
|-----------------|--------|------|------|-------------------|

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|--------------------------------|--|
| Background information: | |
| Length of time owned: | |

Please circle the information that best fits your pet

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|--------------------------------|---------|--------------|--------|
| Place of purchase? | Breeder | Pet shop | Rescue |
| How often is your pet handled? | Daily | Occasionally | Never |

| | |
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| Husbandry | |
| Housed indoor or outdoor? | Is the animal allowed free roaming in the house? Yes/ No |
| Where is the cage located? | |
| Type of cage? | |
| Size of the cage? | |
| Cage bedding? | |
| Describe how often the cage is cleaned and what is used to clean the cage? | |
| Types of cage furniture? | |

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| What toys are available? | |
| What are the toys made of? | |

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| Any other pets? Yes/No | If yes, please specify: |
| Are animals housed together or singly? | |
| If not housed together, where are the other animals located? | |

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| Nutrition | |
| What water source is offered? | |
| How often is water changed? | |
| How often is the water source cleaned? | |

| | | |
|--|----------------------|-----------|
| Pellets Yes / No | Brand: | Quantity? |
| Describe the remainder of the diet: | | |
| Do you provide any supplements? Yes / No | If yes, please list: | |