

shelter use only
Adopted by: _____
Date: _____

WASHINGTON FERRET RESCUE & SHELTER
FERRET INFORMATION

This information will be provided to the people adopting this ferret.

Ferret's Name: _____ Breeder: _____

Male/Female: _____ Neutered/Spayed?: _____ Descended?: _____

Approximate Birthday (month/year): _____ Color: _____

Where was he/she obtained? _____

How did you hear about our Rescue? _____

Has this ferret been vaccinated for Canine Distemper? _____ Date: _____

Has this ferret been vaccinated for Rabies? _____ Date: _____

Any medical history/operations? _____

Who is the vet with records of this ferret? _____ Name the records are in? _____

Address/City _____

What type of food has this ferret been eating? Ferret Cat Other

(brand & flavor *please*) _____

What treats does this ferret like to eat? _____

Does this ferret use a water bottle or bowl? _____ Is this ferret used to being caged? _____

What does this ferret play with? _____

Box or paper trained? _____ Housebroken? _____

Does this ferret like baths? _____ Having his nails trimmed? _____

Does he/she have a good temperament? _____ Is he/she a biter? _____

What other animals has this ferret lived with? _____

Is this ferret comfortable with children/strangers? _____

What other things can you say about this ferret that the next owner might find useful or interesting?

(OPTIONAL) Reason for giving up the ferret: _____

Would you like the next owners to contact you? _____

Please leave your name and address/phone number: _____

I hereby certify to the best of my knowledge that all of the above information is true and complete. I give up all rights to above named ferret.

Signature: _____ Date: _____