FERRET INFORMATION SHEET

- * Complete one sheet for each ferret you own
- * Keep each sheet with ferret's medical records
- * Give a copy to anyone who looks after your ferret

Ferret's Name:	Phone # of regular vet:		
Colour:	Name and address of regular animal hospital:		
Distinguishing Features:			
Male / Female:	Phone # of 24 hour facility (who will see ferrets):		
Owners Name:			
Owners Phone No	Name and address of 24 hour facility:		
Ferrets' Date of Birth:			
Sterilisation Date:	Name & phone # of a local experienced ferret owner:		
Performed by:			
Microchip sticker or number (if applicable)			
	Known allergies:		
Revolution - Ferrets require monthly treatment against			
fleas, ear mites, worms, sarcoptic mange and heartworm.	Any regular medications, and schedule:		
Date of month Revolution normally administered:			
Normal diet / Food likes & dislikes:			
	Notes / Comments:		

Vaccinations / Checkups / Treatments / Surgeries

Ferrets require a vaccination for "Ferret Distemper" (3 in 1) at 12 weeks of age, and annually from then.

Date	Weight	Details	Date	Weight	Details