



Pet's Name \_\_\_\_\_ Avian / Reptile / Pocket Pet  
Owner's Name \_\_\_\_\_  
Date of First Visit \_\_\_\_\_

**Your Pet's First Visit**

- Where was the pet obtained? When? \_\_\_\_\_  
\_\_\_\_\_
- How old (DOB)? \_\_\_\_\_
- Previous healthcare \_\_\_\_\_  
\_\_\_\_\_
- Other pets in household \_\_\_\_\_
- Cage mate(s) \_\_\_\_\_

**Husbandry**

- Housing / cage description \_\_\_\_\_
- Substrate / cage lining \_\_\_\_\_
- Cage contents, toys, perches, dishes, etc. \_\_\_\_\_
- Heat sources / hrs. per day \_\_\_\_\_
- Light sources / hrs. per day \_\_\_\_\_
- Humidity \_\_\_\_\_
- Location of cage in household \_\_\_\_\_
- Cage cleaning protocol \_\_\_\_\_
- Hours per day caged \_\_\_\_\_

**Diet**

- Staple diet ( seed, pellet, mixed ) \_\_\_\_\_
- Fresh / frozen foods \_\_\_\_\_
- Treats / supplements \_\_\_\_\_
- Frequency food / water changed \_\_\_\_\_
- Eating / drinking \_\_\_\_\_
- Passing stools / urine \_\_\_\_\_

**Exotics Biography**