



Potbelly Pig Questionnaire

Date: _____

Owner: _____ Pet's Name: _____

Where did you purchase your pet? _____

How long have you had this animal? _____

Approximate age? _____

Any prior vaccines or treatment for mange? _____

Who is the primary caretaker? _____

Please describe the enclosure your pet is kept in: Include where enclosure is kept, indoor, outdoor or both, etc.

Any type of heat source used in enclosure or sleeping area? If so, please describe.

What type of bedding/substrate (litter box, if any) is used in enclosure? _____

Does your pet share an enclosure? Y / N

Describe _____

What is your pet's diet and how much/often do you feed?

When was your pet's last bowel movement? _____

Do you have any other animals? _____

Any behavioral/temperament issues? _____

What exercise does your pet get and how often? _____

What toys are provided, if any? _____