



**Aquatics • Pets • Reptiles**

**REPTILE HEALTH CHECK**

Animal Purchased \_\_\_\_\_

Date Purchased \_\_\_\_\_

**Animal Health Check**

Body Condition ☐

Eyes, Ears, Skin and Mouth ☐

Toes and Tails ☐

Movement ☐

Any comments regarding the animal's health \_\_\_\_\_

**Customers Details**

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

**Please tick one of these statements**

I have purchased the required set-up equipment from Japanese Water Gardens: Yes ☐ No ☐

I am over 16 years of age ☐

I have received a care sheet ☐

**Declaration:**

*I have the correct reptile set-up and understand the requirements of the animal.*

*I am committed to providing all its welfare needs.*

*I am happy with the health and condition of the animal.*

Signed \_\_\_\_\_

**If you have any concerns or questions, please do not hesitate to contact us on 0115 9397926  
We are here to help.**

Name of member of staff performing the check \_\_\_\_\_