



# Self-Certification of Rabbit Health

This Certificate Must Accompany ALL Eligible  
Animals to ALL Maryland Rabbit Shows  
This is not an Interstate Certificate

Name of Owner \_\_\_\_\_

Address \_\_\_\_\_

Telephone number \_\_\_\_\_ No. of Rabbits on Premises \_\_\_\_\_

Tattoo	Registry Name or No.	Age	Sex	Breed
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

**Inspection of animals** (Check boxes if clear of visual signs)

**SKIN & HEAD:** No visible evidence of skin infections, discharge from the eyes or nose or excessive head shaking with particular emphasis on *Ear mites, Fur mites, Myxomatosis, and Ringworm.*

**RESPIRATORY:** No signs of infectious respiratory disease such as sneezing, white nasal discharge or excessive tearing which are all common signs of *Snuffles.*

**INTESTINAL:** No Evidence of soft droppings, soiling on rump or hocks consistent with *Diarrhea*

**OTHER:** Recent exposure to, or clinical signs of, any contagious or infectious disease conditions that would exclude rabbits from exhibition. *Viral Hemorrhagic Disease (VHD)*

**NO** unusual mortality in the last 30 days.

I, the owner/authorized caretaker/transporter, of the rabbits identified above have visually examined these rabbits and observed no signs of contagious or infectious disease and have no knowledge of recent (21 day) exposure to any contagious or infectious disease.

\_\_\_\_\_  
Signature ( Parent or guardian must sign for children under age 18)

\_\_\_\_\_  
Date

MDA-E-21 Rev (10/08)