

RABBIT PROJECT RECORD

20____

Name _____ Year in Project _____

List your goals in this project for this year:

1. _____
2. _____

Number of rabbit project meetings held _____ I attended _____ None Held _____
 County meetings I attended _____
 Other meetings I attended _____

What 4-H literature and other books, leaflets, videos, etc. have you studied from this year?

Who was your project leader or who helped you with your project?

CONVERSATIONS, PROJECT TALKS, AND DEMONSTRATIONS (formal or given to one or more people)		
Date	Topic	Where Presented and To Whom

Breeds of rabbits owned or managed: _____

Check the practices you followed.

I already knew Or did	I plan to do	I learned or started this year
_____	_____	_____ Keep thorough records on all bucks and does
_____	_____	_____ Keep the rabbitry sanitary
_____	_____	_____ Clean all waterers & feeders regularly
_____	_____	_____ Keep all animals & birds out of the rabbitry
_____	_____	_____ Feed & water daily at the same time of day
_____	_____	_____ Check at least twice a day
_____	_____	_____ Feed high quality hay
_____	_____	_____ Feed only the amount of pellets a rabbit can eat in 24 hours
_____	_____	_____ Check a bred doe 14 days after mating by palpation
_____	_____	_____ Put nest box in cage no later than 25 days after mating
_____	_____	_____ Wean young at 5 weeks of age depending on breed
_____	_____	_____ Separate bucks from does no later than 8 weeks of age
_____	_____	_____ Make sure all rabbits have shelter for winter & shade for summer
_____	_____	_____ Isolate all new rabbits from the herd for about 2 weeks
_____	_____	_____ Maintain breeds as pure as possible by not cross breeding
_____	_____	_____ Other _____

Date Project Started: _____

Date Project Closed: _____

	# Rabbits at Start	Value		# Rabbits at close	Value
Senior Does			Senior Does		
Senior Bucks			Senior Bucks		
Junior Does			Junior Does		
Junior Bucks			Junior Bucks		
TOTAL			TOTAL		

Note: Junior does and bucks are under 6 months of age

What is your favorite breed of rabbit and why? _____

FEED RECORDS					
Month	Type of Food	Cost	Month	Type of Food	Cost
					Total Cost

OTHER EXPENSES (equipment, vaccinations, health records, etc.)					
Month	Item Bought	Cost	Month	Item Bought	Cost
					Total Cost

