**Pet Information**

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| Pet Name: | Species: |
| Breed | Weight | Age | Color: |
| (\_\_)Male     Neutered:  Y  /  N | (\_\_)Female     Spayed:  Y  /  N |
| ID Tag | Tattoo | Microchip |
| Please initial to verify that any and all applicable**vaccinations and licenses** as required by law are current: |
| Notable Medical Information, Allergies, Phobias etc. |
| **MEDICATIONS** |
| Name | Dosage | How to Administer |
|  |  |  |
|  |  |  |
| **FEEDING SCHEDULE** |
| AM: Name of Pet Food \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Size of Portion\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PM: Name of Pet Food \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Size of Portion\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name of Treats Allowed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Frequency \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **EXERCISE SCHEDULE** |
| Activity \_\_\_\_\_\_\_\_\_\_\_\_ Frequency and Duration \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Activity \_\_\_\_\_\_\_\_\_\_\_\_ Frequency and Duration \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Location of suitable harnasses/collars for walks \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Preferred time for walks \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **GENERAL INFORMATION** |
| Has the pet ever bitten a person   Y  /  N Has the pet ever started a fight with or bitten another animal   Y  /  N Is the pet friendly towards children and adults   Y  /  N Name things your pet dislikes: Name things your pet likes: Favorite hiding place(s): Favorite toy(s): Restricted areas: Additional information: |
| Owners Full Names: |
| Identity/Social Security/Other (specify) numbers: |

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| I, the owner of the above listed pet warrant that the information contained herein is true and correct to the best of my knowledge. Owner's Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |