



ANIMAL INFORMATION

(Please list animal individually)

Animal's Name _____ Breed _____

Color _____ Species _____

DOB, if known _____ Sex _____ Spayed/Neutered? _____

Weight _____ Collar/halter color _____ ID tags? _____

Microchip/tattoo? _____

How long have you had this animal? Where from? _____

Any fears or phobias? Please explain. _____

Any history of biting/kicking/rearing, etc.? _____

Diet/Brand/Description _____

AM Diet _____ PM Diet _____

Are treats allowed? _____ Frequency? _____

Medications? Please list name/strength/frequency & dosages _____



Any history of illness(es) or allergies? _____

Current on Vaccines? _____

Favorite toys? _____

Any exercise restrictions? _____

Is your animal good with children? _____

Has your pet ever fought with another animal? Please explain. _____

Does your animal enjoy being brushed/groomed? _____

Does your pet like to exercise/play? _____

Leash/lead "manners?" _____

How do animals react when you leave home? _____

Do you use a crate/carrier when you are not home? _____