



Pet Profile

Client Name: _____

Pet Name _____ Dog Cat

Description _____ Weight _____ Estimated?

Age: _____ Male Female

Rabies Vaccination Expiration Date: _____

License Number _____

Temperament w strangers..... Excited Friendly Aloof Cautious Mean

Is this animal spayed or neutered?..... Yes No

Has this pet ever bitten anyone?..... Yes No

If "Yes" explain: _____

Has this pet ever acted aggressively towards anyone?..... Yes No

If "Yes" explain: _____

How confident are you that this pet will not bite or act aggressively toward us?

Extremely certain Somewhat certain moderately sure

not too sure very sure

Favorite Hiding Place (s):

Favorite Activities:

Feeding Instructions:

Medications if any:

Physical Conditions and other Care instructions:
