

ANIMAL INFORMATION										
Name					Sex:		Male	Fe	male	Altered
Birthday			Age		W	eight				
Species				Breed						
Color				Allergy(s	)					
Microchip #		Rabies #	#		Tattoo Location/No.					
Health Issues										

PERSONALITY INFORMATION				
	Yes	No	EXPLAIN	
Does your animal play well with others (not including other animals in your household?				
Has your pet been aggressive toward people or other animals?				
Are there any areas of the body your animal doesn't like touched?				
Is your animal protective of food, water, or toys?				
Does your animal have aversions to loud noises, heat, cold, rain, snow, baths, or other situations?				
Does your animal have specific reactions to stress (including refusal to eat, chewing, barking, scratching, etc.)				
Has your animal ever escaped from your household?				
Any exercise restrictions?				
Has your animal ever jumped a 6 foot, or higher, fence?				
Is your animal prone to chewing on, or eating foreign objects?				
How do you reward good behavior?				
How do you respond to negative behavior?				

Care and Feeding Instructions			
Food Brand:	Amount Fed:		
Normal feeding times:	Feeding Procedure:		

Medications			
Medication Name:	Dosage:		
Administration Method:	Frequency:		

Please use the area below to mention anything else you would like us to know about your animal.