



Pet Emergency Preparedness Form

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Should you be unavailable to care for your pet, information on this form can help others better care for them.

Pet Information

Pet name _____
Breed _____
Color _____ Gender _____ Weight _____
Microchip # _____ Is the microchip registered and up to date? _____

Owner Information

Your name _____
Your phone # _____ Alternate phone 1 _____ Alternate phone 2 _____
Email address _____
Who else may be contacted for this pet? _____

Food and Medications

Type of food _____ ☐ Wet ☐ Dry Amount _____ Frequency _____
Name of medication _____ Instructions _____
Name of medication _____ Instructions _____

Medical Information

Veterinarian name _____ Veterinarian phone # _____
Date of last rabies vaccine _____ Rabies Certificate # _____
Date of last bordetella vaccine _____ Date of last distemper/parvo vaccine _____
Date of last Heartworm test and result (dogs) _____
Date of last FeLV/FIV test and result (cats) _____

Current medical conditions _____

Behavior concerns _____
