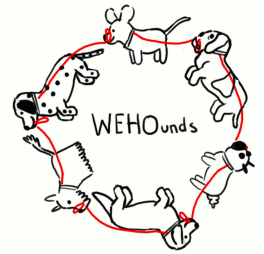


WeHounds PET INFORMATION SHEET



BASICS

Pet Name(s): _____

Owner(s) Full Name(s): _____

Address: _____

Telephone 1: _____ Mobile Work Home Other

Telephone 2: _____ Mobile Work Home Other

Email Address: _____

Fastest and most reliable way to get in touch? _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Name of Pet's Veterinarian: _____

Vet's Address: _____

Vet's Telephone: _____

PET INFO

Breed _____ Weight _____ Age _____ Color _____

() Male Neutered: Y / N

() Female Spayed: Y / N

ID Tag _____ Tattoo _____ Microchip _____

Vaccinations and licenses as required by law are current (*Please initial*): _____

Has your dog been vaccinated for Bordetella (Kennel Cough)? Y / N

Is your dog on any flea or tick medication (Frontline, etc)? Y / N _____

Is your dog a "Show Dog?" Y / N

Notable Medical Information, Allergies, Injuries, Phobias, etc:

MEDICATIONS

Medication Name: _____
Dosage: _____
How to Administer: _____
Medication 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 _____

What kind of walk does your dog prefer? (**Check one**) Vigorous/ Athletic Steady Pace/ Standard
 Leisurely Strolls Short and Brief "Business" Walks Get Back Inside As Fast As Possible

Location of suitable harnesses /collars for walks _____

Do you authorize WeHounds to use our own collar or leash if necessary? Y / N

GENERAL INFORMATION

Has the pet ever bitten a person? Y / N
If yes, please explain: _____

Has the pet ever started a fight with or bitten another animal? Y / N
If yes, please explain: _____

Is the pet friendly towards children and adults? Y / N
If no, please explain: _____

Name things your pet dislikes: _____
Name things your pet likes: _____
Favorite hiding place(s): _____
Favorite toy(s): _____
Restricted areas: _____
Additional information: _____

How would you describe your dog's behavior? *Circle all that apply.*

- | | | | | | | |
|----------|----------|-------|------------|-----------|-------------|--------------|
| Social | Nervous | Shy | Aggressive | Defensive | Tranquil | Excitable |
| Cautious | Athletic | Stoic | Curious | Friendly | Mischievous | Couch Potato |

PREFERRED SCHEDULE

PLEASE NOTE: Due to traffic, weather, changing schedules and the needs of other clients, we cannot guarantee an *exact* time of arrival on every visit. While we do our best to accommodate a specific time request, we work in blocks of time and kindly ask for your flexibility. Thank you.

Please circle your preferred date(s) & time(s) of walks. **Availability is subject to change**

AM: Between 8 -11 AM

Mid: Between 12 - 3 PM

PM: Between 4 - 6 PM

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM	AM	AM	AM	AM	AM
Mid	Mid	Mid	Mid	Mid	Mid
PM	PM	PM	PM	PM	PM

**In the event that your usual walker is not available, we will notify you with as much advanced notice as possible. In such a scenario, do you authorize WeHounds to send a substitute walker?
Y / N Initial _____**

How would you like to share keys? Lockbox Copy of key Hidden key

How would you like to receive your pet’s photo? Text Email None

Is there anything else at all that you’d like us to know?

How did you hear about us? Friend Vet Yelp Pet Store Website Posters/Cards/Flyers

Who may we thank for telling you about us? _____

SIGNATURES

I, the sole owner(s) of the above listed pet(s), warrant that the information contained herein is true and correct to the best of my knowledge.

Owner’s Name(s): _____

Owner's Signature(s): _____ Date: _____