



THE BASICS

Friendly Pet Care

~ Care for CATS and their home ~

Date: _____

Pet Owners: _____

Address _____ City: _____ Zip: _____

Phone: _____ Cell 1: _____ Cell 2: _____

Work: _____ Extension: _____

Preferred contact method: _____

E-mail 1: _____ E-Mail 2: _____

How did you hear about Friendly Pet Care? _____

Permission to enter: _____

Please print then sign here

Emergency Contact: _____

Phone: _____ Cell: _____

(Ideally this person retains a key to the home.)

Preferred Veterinarian: _____

Address _____ City: _____ Zip: _____

Phone: _____

Authorization to obtain medical care: _____

Please print then sign here

Entry granted and will be by:

1. Key(s) ____ 2. Garage door opener ____ 3. Security Panel ____ 4. Other ____

If Other, please explain: _____

Is there a security alarm? _____

Will it be activated? _____

Notation of all codes must be separate from this form!

Security System Operation Notes:

Check here when access tools have been obtained: _____

Remember, we urge all clients to provide 2 keys or a combination of 2 methods of entry. Please ensure any keys made work correctly.

PRIMARY PETS

* indicates health concern details

Name	Age	General Description	*

Additional pets may be detailed on last page.

If at all possible, please provide photos of your pets to be kept in your file. It is helpful to us to be able to clearly distinguish between pets in multi-pet homes. This is especially important when medications are required.

***HEALTH CONCERNS**

NAME	MEDICATION/dose	FREQUENCY	ALERTS (allergies?)

Additional Health notes (if any):

FEEDING REQUIREMENTS

Frequency: _____

Portion: _____

Location: _____

Water Limitations? _____ If so, what? _____

Treats: _____

Additional Notes: _____

KEEPING EVERYONE & EVERYTHING SAFE

Indoor only cats? _____ Details: _____

Known escape routes: _____

I.D. Tag? _____ Micro Chip? _____

Favorite hiding places: _____

Restricted areas: _____

Any history of aggression? _____ Who? _____

Details: _____

FUN & EXERCISE

Enjoy brushing? _____ Brush kept: _____

Favorite toys: _____

Favorite games: _____

Additional Notes: _____

KEEPING THINGS CLEAN

Litter box(es) is/are located: _____

We'll find "Scooping" bags in the: _____

Extra litter is kept: _____

Vacuum is stored: _____

Cleaning supplies are found: _____

Additional Notes: _____

REGARDING ADDITIONAL SERVICES

1. Bringing in the newspaper & mail

Locked mail box? _____

Obtain key if yes!

Preferred Placement: _____

2. Indoor Plant requirements (if any):

3. Trash & Recycle Day is: _____

Cans located: _____

4. Lights and Timer Details: _____

ADDITIONAL PETS DETAILS

Name	Age	General Description	*

Other Things We Should Know

I have read all the above and attest it is accurate:

Signature: _____

Please sign here

Please print name: _____

Today's date: _____