



## CLIENT RECORD

Date: \_\_\_\_\_

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### ABOUT YOU & YOUR PET(S)

Family Members: \_\_\_\_\_

Your Pet(s) names, breeds, and ages & descriptions: \_\_\_\_\_

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### TRAVEL INFORMATION

Date & time leaving: \_\_\_\_\_ Flight (if applicable): \_\_\_\_\_

Date & time returning: \_\_\_\_\_ Flight (if applicable): \_\_\_\_\_

E-mail address while away: \_\_\_\_\_

How you can be contacted while away (include your cell phone, friend's name, hotel, cruise line, etc.)

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### VETERINARIAN INFO

Vet's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Nearest Emergency Clinic: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

### PET HEALTH CONCERNS

Does your pet have any health problems? If so, please describe: \_\_\_\_\_

\_\_\_\_\_

List any medications and how administered: \_\_\_\_\_

\_\_\_\_\_

Fears or behavior issues we should know about: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**OTHER EMERGENCY INFO**

Local emergency contact (someone we can contact if you cannot be reached):

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Does this person have a key to your home?    Yes        No

Others who have keys to your home: \_\_\_\_\_

Home Service Companies (plumber, electrician, etc.): \_\_\_\_\_

\_\_\_\_\_

**FEEDING AND CARE INSTRUCTIONS**

Pet Food (brand name): \_\_\_\_\_

Times fed and amount per meal: \_\_\_\_\_

Treats given and amount: \_\_\_\_\_

Type of exercise preferred: \_\_\_\_\_

Location of leash: \_\_\_\_\_ Carriers: \_\_\_\_\_

**LOCATION OF IMPORTANT ITEMS**

Cleaning supplies: \_\_\_\_\_

Vacuum cleaner: \_\_\_\_\_

Paper towels / dog towels: \_\_\_\_\_

Alarm panel: \_\_\_\_\_

Breaker box: \_\_\_\_\_

Other: \_\_\_\_\_

**OTHER IMPORTANT INFO**

Is there anything else your pet sitter should know about your pets or home?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_