

## Pet information for future caregivers (dog)

Instructions: Please fill out the following information with as much detail as possible. Attach additional pages as necessary and place this document, along with any pertinent veterinary records, with your last will and testament or final directives. We recommend reviewing and updating this information annually or as frequently as your dog's situation changes. If you plan to leave your animal in the care of a friend or family member, review this document with them after you complete it. If you plan to leave your animal in the care of a shelter to place it in a new home, please leave instructions to bring this form and any veterinary records to the shelter along with your dog.

Dog's Name:	Sex: Male Female Age or exact birthdate if known	
Breed: Primary	Secondary Approximate weight:	
Is your dog spayed/neute	ed? Yes No	
Current on vaccinations?	Yes No Date of last vaccination:	
Microchipped? Yes N	o Microchip Provider:	
Name and phone numbe	of dog's veterinarian: Name: Phone:	
How long have you had th	nis dog? Where did you get him/her?	
Is your dog predominantly	an indoor or outdoor dog?	
	edical issues:	
	et visit	
_	person's skin with her/his teeth? Yes No If yes, please descri	be 
Describe how your dog re	acts to and/or plays with other dogs:	
Is your dog crate trained?	Yes No	
List all other pets (species)	this dog has lived with and describe any concerns:	
If your dog has experience	e with children, what were their ages?	
Describe your dog's beha	vior when she/he interacts with children:	
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Has your dog ever injured another animal? Yes No If yes, please describe what occurred:
What are your dog's favorite games/toys?
Is your dog bonded to another pet? Yes No Which?
Brand of food and feeding routine:
Does your dog eat "people food"? Yes No Favorite treat(s):
Where does he/she eat?
When you are eating a meal at home, where is the dog?
If your dog picks up something that you don't want him/her to have (i.e., a chicken bone, a piece of garbage, a shoe), how does the dog react when you try to take it away?
Has your dog been through a training program? Yes No If yes, describe:
Have you ever consulted a trainer or behaviorist on any problems concerning this dog? Yes No
If yes, describe:
What commands does your dog know?
Where does your dog sleep?
What forms of exercise does your dog get, and how often?
How does he/she do on a leash?
How many hours a day is your dog left alone? Where is the dog when you're away?
What kind of behavior is displayed when he is left alone?
What people cause your dog to be nervous, fearful, assertive, or unsure?
How does your dog react when people come to your house to visit?
What areas of your dog's body does she/he NOT like you to touch?
How does your dog react to being touched there?
Is your dog potty-trained?

How many house-soiling mistakes does your dog have each week?
Please describe your dog's daily routine:
What do you think the ideal home for your dog would look like?
Please provide any other information that would be helpful to a future caregiver and/or would assist a shelter in finding a home for your dog:
For questions about planning for your pets, contact Roice-Hurst Humane Society at (970-434-7337).