

If I cannot care for my pets, the person below has offered to help. Name:

Address:

## Telephone number:

Number and type of pet(s):

## Pet's name(s):

Temperament: Likes and dislikes?:
Any urgent care needs (e.g. medication and how many times a day):

Which vet practice is the pet registered at?:

> Food, medicine, leads are kept:
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