

EXOTIC BARN PET INFORMATION

DATE: _____ Customer name & ID #: _____

NAME: _____

AGE: _____

BREED: _____ COLOR: _____

WEIGHT: _____ SEX: _____

SPAYED OR NEUTERED? _____

DOES THIS PET TAKE ANY DAILY MEDICATIONS? Y/N If yes describe below.

DOES THIS PET HAVE ANY HEALTH PROBLEMS? Y/N If yes describe below.

DOES THIS PET HAVE ID TAGS OR A MICROCHIP IMPLANT?

IS THIS PET CURRENT ON IT'S VACCINATIONS? Y/N

DOES THIS PET USUALLY EAT NORMALLY WHEN YOU ARE GONE?

Y/N UNKNOWN

DO YOU HAVE BARN CATS YOU WOULD LIKE CARED FOR? Y/N

If yes, describe below.

(feeding and watering barn cats is free of charge)

MARK ALL THAT APPLY TO THIS PET:

This pet is usually (fill in the blank) with people.

friendly and curious

cautious and curious

indiferent

shy but curious

frightened

aggressive

Other: _____

Describe daily feeding routine below:

Include explanations to above questions and any information you feel is important to your pets care below.