

PET CARE INSTRUCTIONS



Thanks for taking care of:

Here's all the information you'll need!

Where to find us

Where we'll be:			
Phone:		Mobile phone:	
Date / time expected home:			

Instructions

Meals & snacks:	
Walk schedule:	
Allergies:	
Medication:	
Hiding places:	
Favourite toys & games:	
Frightened of: e.g. thunder, loud noises	
Doesn't like: e.g. strangers, other pets, the postman	

Additional information



Pet medical emergency information

Regular veterinarian (name and address):			
Name:		Phone:	
Address:			
Emergency veterinary clinic			
Name:		Phone:	
Address:			
Neighbour / friend			
Name:		Phone:	
Address:			
We give you permission to authorise emergency medical care for our pet(s) as deemed necessary by a veterinarian, and we will be responsible for full payment of such care. YES <input type="checkbox"/> NO <input type="checkbox"/> CALL US FIRST <input type="checkbox"/>			
Signature:			

Home emergency information

Here's information you'll need in case you notice a break-in, fire, gas odour, flood or electrical problem when you arrive.

Police / fire / ambulance:	0 0 0		
SES:	132 500		
Our name:			
Our address:			
Nearest intersection:			
Gas company:		Phone:	
Location of gas shut-off valve:			
Water company:		Phone:	
Location of water shut-off valve:			
Electricity company:		Phone:	
Location of electrical breaker box:			
We give you permission to authorise emergency work if necessary to prevent damage, and we will be responsible for full payment of such work. YES <input type="checkbox"/> NO <input type="checkbox"/> CALL US FIRST <input type="checkbox"/>			
Signature:			