

Doggy Care For: _____

VET – Name _____ Phone _____

EMERGENCY VET – Name _____ Phone _____

ABOUT / GENERAL

We have indicated yes/no below. Further details provided as needed.

___ HAS ALLERGIES: _____

___ GETS ALONG WITH KIDS - NOTES: _____

___ GETS ALONG WITH DOGS - NOTES: _____

___ SLEEPING LOCATION: _____

___ FAVORITE WALK LOCATION: _____

___ PERMISSION REQUIRED - Eg. For Food: _____

___ [Other: _____]: _____

___ [Other: _____]: _____

___ [Other: _____]: _____

Where things are located in our home:

» ACCESSORIES

Leash (Default) - _____

Leash Alt: (_____) - _____

» FOOD

Food - _____

Wet-food/Topper:: _____ - _____

Supplement: _____ - _____

Supplement: _____ - _____

» HYGIENE

[Item: _____] - _____

[Item: _____] - _____

[Item: _____] - _____

TIMES

We have indicated times and circled the AM/PM for the times we'd like care for our dog.

» WALKS – Between:

_____ AM / PM and _____ AM / PM WHERE: _____

_____ AM / PM and _____ AM / PM WHERE: _____

_____ AM / PM and _____ AM / PM WHERE: _____

_____ AM / PM and _____ AM / PM WHERE: _____

» FOOD – Between:

_____ AM / PM and _____ AM / PM WHAT: _____

_____ AM / PM and _____ AM / PM WHAT: _____

_____ AM / PM and _____ AM / PM WHAT: _____

_____ AM / PM and _____ AM / PM WHAT: _____

» HEALTH – Between:

_____ AM / PM and _____ AM / PM GIVE: _____

_____ AM / PM and _____ AM / PM GIVE: _____

_____ AM / PM and _____ AM / PM GIVE: _____

_____ AM / PM and _____ AM / PM GIVE: _____

» EXTRA – Between:

_____ AM / PM and _____ AM / PM DO: _____

_____ AM / PM and _____ AM / PM DO: _____

_____ AM / PM and _____ AM / PM DO: _____

_____ AM / PM and _____ AM / PM DO: _____

EXTRA NOTES

Our House

ADDRESS _____

Non-Emergency Services Phone Number: _____

Call [_____] If Something Breaks: _____

Welcome _____!

Thank you again for taking care of our home and/or pets!

We hope that you find our home very comfortable. #staycation

Food

FRIDGE & PANTRY

» _____

» _____

QUICK OUT FOOD

» _____

» _____

NICER OUT PLACES

» _____

» _____

Rooms Available

BEDROOM #1

BEDROOM #2

BATHROOM #1

BATHROOM #2

Entertainment

WIFI

TELEVISION & STREAMING

MUSIC

LIBATIONS

INSTRUMENTS / GAMES / OTHER

FRIENDS

Miscellaneous

LATE NIGHT / KEEP QUIET

DON'T LOSE FOB / KEYS

CHECK MAIL / WATER PLANTS / OTHER MAINTENANCE

PARKING / MOVE CARS

EXTRA NOTES

Bath & Laundry

WASHER/DRYER

TOWELS

HYGIENE

EXTRA SHEETS & STUFF

NOTES:

DATE	DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6	DAY 7	NOTES
MORNING								
MIDDAY								
EVENING								