

Pet Biography Form



7200 Mobley Rd, Brooksville, FL 34601
(352) 796-2711 | www.HumaneRescue.org

(Please complete one form for each pet you are enrolling in the Pet Guardianship Program.)

Pet's Name: _____ **Sex:** _____

Dog or Cat? _____ **Age:** _____ **Neutered/Spayed:** _____

Breed: _____

How long have you had this pet? _____ **Microchipped?** _____

If yes, please provide the Microchip Number: _____

Pet's Description/Color/Markings: _____

Currently on Medications? _____ **Name of Medication(s):** _____

Time of Day Given: _____

Reason for Medication: _____

Does your pet have any past or current injuries/conditions: _____

Does your pet have any allergies? Explain: _____

Does your pet have any activity restrictions: _____

Where did you get your pet from? _____

Does your pet get along with other pets? If so, what kind: _____

Is your pet good around children? _____

Is your pet afraid of anything such as noises or objects: _____

How does your pet react to strangers: _____

Does your pet have any separation anxiety behaviors? _____

If your pet is a cat, is your cat declawed? _____

Does your cat have any litterbox issues? _____

Do you keep your cat indoors 24/7? If not, please explain your cat's territory: _____

If your pet is a dog, how often do you take your dog for walks? _____

Did your dog have free access to a fenced yard? _____

Does your dog like to ride in vehicles? _____

What do you feed your pet? _____

What is the feeding schedule? _____

Can your pet have treats? If so, explain: _____

Circle All that Apply to Your Pet:

Licker	Chewer	Jumper	Barker	Aggressive
Biter	Talker	Crier	Marker	Loner
Playful	Anxious/Hyper	Cuddler	Scratcher	Nervous
Shy	Hider	Friendly	Independent	Curious
Affectionate	Drooler	Escape Artist	Runner	Lazy

Describe your pet's favorite toy(s): _____

Describe your pet's sleeping habits, favorite bedding, favorite location: _____

Who is your pet's veterinarian? Name: _____

Address: _____

Phone: _____

What else would you like us to know about your pet? _____

Thank you for entrusting your pet with us.

Printed Name

Date

Address

Phone: _____ Email: _____

Pet Owner's Signature