



VERY IMPORTANT PAWS

PET BOARDING INSTRUCTIONS

PET INFORMATION

Pet Name

Breed

Color

Gender

Weight

Microchip #

OWNER INFORMATION

Your Name

Your Address

Your Phone #

Email Address

Alternate Phone # 1

Alternate Phone # 2

FOOD & MEDICATION

Type of Food

☐ Wet ☐ Dry

Amount

Frequency

Name of Medication

Instructions

Name of Medication

Instructions

MEDICAL INFORMATION

Veterinarian Name

Veterinarian Phone #

Date of Last Rabies Vaccine

Rabies Certificate #

Dates of Last Bordetella Vaccine

Date of Last Distemper/Parvo Vaccine

Dates of Last Heartworm Test & result

Date of Last Distemper/Parvo Vaccine

Current Medical Conditions

Behavior Concerns



Disclaimer:

This information is sourced directly from the Centers for Disease Control and Prevention website and is provided for informational purposes only.