

Date Completed \_\_\_\_\_

**Schedule A  
Animal Information Sheet  
Pet Stewardship Program**

Name of Owner \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Prov. \_\_\_\_\_

Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_ Email \_\_\_\_\_

Name of Companion Animal \_\_\_\_\_

How long have you had this Companion Animal? \_\_\_\_\_

Date of Birth \_\_\_\_\_

Date of Adoption \_\_\_\_\_ Microchip # \_\_\_\_\_

**Description of Companion Animal**

Breed \_\_\_\_\_ Colour and Markings \_\_\_\_\_

Eye Colour \_\_\_\_ Weight \_\_\_\_ Sex \_\_\_\_ Altered \_\_\_\_ Declawed \_\_\_\_

Long/Short Hair \_\_\_\_\_

Other Noticeable Identifying Characteristics (Photograph Enclosed)

**Character of Companion Animal**

Eating Preferences \_\_\_\_\_ Brand of Food \_\_\_\_\_

How often fed per day? \_\_\_\_\_ Favorite Treats \_\_\_\_\_

Type of liter preferred (if applicable) \_\_\_\_\_

Sleeping Preferences and Habits \_\_\_\_\_

Exercise Preferences \_\_\_\_\_

Play Preferences (indicate favorite toys) \_\_\_\_\_

General Personality Traits (shy, outgoing, affectionate, playful, etc)

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Particular Grooming Needs \_\_\_\_\_

Enjoys being groomed?      Yes \_\_\_ No \_\_\_  
Walks on a leash?            Yes \_\_\_ No \_\_\_  
Travels well in car?        Yes \_\_\_ No \_\_\_  
Can be left alone?          Yes \_\_\_ No \_\_\_

In your own words, describe your Companion Animal.

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**Health Record**

Name of Veterinarian \_\_\_\_\_ Name of Clinic \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Prov \_\_\_\_\_

Postal Code \_\_\_\_\_ Phone Number \_\_\_\_\_

**Medical History**

Vaccinations: Yes \_\_\_ No \_\_\_ Date of last vaccination \_\_\_\_\_

**Cats:**

Rabies \_\_\_\_\_ Distemper \_\_\_\_\_ Feline Leukemia \_\_\_\_\_

**Dogs:**

Rabies \_\_\_\_\_ Parvovirus \_\_\_\_\_ Distemper \_\_\_\_\_

Hepatitis \_\_\_\_\_ Parainfluenza \_\_\_\_\_

If female, has she ever had a litter? Yes \_\_\_ No \_\_\_

Allergies or other Medical Issues

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Ongoing Treatment (if any) \_\_\_\_\_

***Preferred Home***

The best home for my Companion Animal would have:

- Children \_\_\_\_\_
- Access to Outdoors \_\_\_\_\_
- Other Dogs \_\_\_\_\_
- Other Cats \_\_\_\_\_
- Other Animals \_\_\_\_\_

Please expand on the above, or make other requests that you think are important for your Companion Animal.

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In your own words, describe the home that you would like for your Companion Animal.

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***Other Information***

- Personal Letter \_\_\_\_\_
- Section of Will Included \_\_\_\_\_
- Digital Picture \_\_\_\_\_