

Animal Information Form

Animal # _____



My pet's name is: _____

Breed: _____

Is your pet: Male / Female

How old is your pet? _____ (Years/Months/Days)

How long have you owned your pet? _____ (Years/Months/Days)

Has your pet ever bitten anyone? ☐ Yes ☐ No

Why are you surrendering your pet: _____

- ☐ Don't want
- ☐ Not getting along with other people (please list): _____
- ☐ Not getting along with other pets (please list): _____
- ☐ Biting:
 - ☐ Do the bites draw blood? ☐ Yes / ☐ No
 - ☐ Why does your pet bite? _____
- ☐ Behavior issues (please list) _____
- ☐ Other: _____

Where did you get the pet?

- ☐ Breeder ☐ Pet Store ☐ Friend ☐ Family ☐ Shelter

What type / brand of food does your pet eat? _____

How much do you feed your pet? _____ How often do you feed your pet? _____

Does your pet have any favorite treats? _____

Would you describe your pet as a "picky eater"? Yes ☐ No ☐

Please explain: _____

This pet is kept: ☐ Indoor ☐ Outdoor ☐ Both

What do you keep your pet in?

- ☐ Aquarium – size: _____ ☐ Hutch – size: _____
- ☐ Wire caging, explain: _____ ☐ Other type: _____
- ☐ Free access of: ☐ House ☐ Yard ☐ Other: _____

Does this pet enjoy being held or handled? Yes ☐ No ☐

If no please explain: _____

Has your pet been around other animal? ☐ Yes ☐ No

- ☐ Cats ☐ Dogs ☐ Ferrets ☐ Birds ☐ Other: _____

How would you describe this pet overall?

- ☐ Calm ☐ Friendly ☐ Playful ☐ Curious ☐ Vocal
- ☐ Cuddly ☐ Clingy ☐ Outgoing ☐ Standoffish ☐ Shy
- ☐ Confident ☐ Dependent ☐ Independent ☐ Fearful ☐ Aggressive

When was the last time your pet was at the veterinarian? _____

Does your pet have any health problems? ☐ Yes ☐ No

If yes please explain: _____

Please add any additional information that you feel would be helpful for us, or a new owner. This will help us make the best possible match with a new home.

May we contact you for further information if it is needed? ☐ Yes ☐ No

