

# pet care printables

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**PET CARE INSTRUCTIONS**  
 Thanks for taking care of **DIANELOU OF PERSE**  
 Here's all the information you'll need



**OWNER CONTACT**  
 Where you'll find:  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**CONTACTS**  
 Name and address:  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**EMERGENCY INFORMATION**

**PLEASE PROVIDE YOUR OWN MEDICATIONS**  
 Please list medication (name and address): \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Emergency vet (name, clinic name and address): \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Hospital or clinic: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 We give you permission to authorize emergency medical care for our animal in absence of orders necessary for its life. We understand that you will not be responsible for full payment of such care.  
 Date: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
 Signature: \_\_\_\_\_

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**PETSITTER REFERENCE GUIDE**

Before leaving for your trip, fill out this list so your pet-sitter has all the information they'll need to keep your pet healthy and happy while you're away.

**Your contact information:**  
 \_\_\_\_\_

**Emergency contact info:**  
 \_\_\_\_\_

**Security code:**  
 \_\_\_\_\_

**Vet information:**  
 \_\_\_\_\_

**Feeding schedule:**  
 \_\_\_\_\_

**Brand of pet food:**  
 \_\_\_\_\_

**Walking schedule:**  
 \_\_\_\_\_

**Medications:**  
 \_\_\_\_\_

**Rooms off limit to animals:**  
 \_\_\_\_\_

**Time and date of return:**  
 \_\_\_\_\_

**Other:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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**pet-sitter notes**

**Pet Information**

Name:	Sex:
Age:	Weight:
Breed:	
Notes:	

**Vet/information**

Clinic:	Phone:
Address:	A/Hours:

**Our Information**

Name:	Surname:
Address:	Home Ph:
Email:	Mobile:

**Holiday Information**

Destination:	Return:
Flight:	Flight:
Departing:	Arriving home:
Email:	

**In Case of Emergency Contact**

Name:	Surname:
Address:	Home Ph:
Email:	Mobile:

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**petinformation**

**Emergency info:**  
 pet name: \_\_\_\_\_ age: \_\_\_\_\_  
 vet name: \_\_\_\_\_  
 phone #: \_\_\_\_\_  
 emergency #: \_\_\_\_\_  
 allergies & medical conditions: \_\_\_\_\_

**Checklist (check)**

Date	Description	Cost	Date	Type	Date	Type

**Checklist (check schedule)**

Date	Type	Date	Type

**Notes:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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