## **EMERGENCY PET CARE FORM**

## In Case of An Accident:

In the event that I,	am incapacitated and unable to
make my wishes known regarding	my pet(s), please honor the following requests:
	is to be contacted as soon as possible at
the following phone number(s)	
•	. If the above phone number cannot be reached,
contact	
number(s)	·
All expenses for the pet(s) will be	paid by them.
If the pet(s) are not injured, they a	re to be cared for by the nearest reputable
boarding kennel, and be kept there	e in the best possible manner, until such time that
arrangements can be made for their	r transport home.
If the pet(s) are injured or ill, they	are to be cared for by the nearest reputable
veterinarian, I prefer that my own	veterinarian
at_	be
	he pet(s) care and treatment. If any pet is injured that pet is to be humanely euthanized.
Photos and descriptions of my peter	(s) are attached along with their health records.
Any dog(s) are tattooed on the	or microchipped with
this/these identification numbers:_	
The welfare of my pet(s) is my pri	mary concern.
Name:	
Address:	
City, State, Zip:	
Phone:	
Signature:	