

Attach Picture Here

## In Case of Emergency

Please take this dog to a veterinarian for necessary medical treatment/boarding. Expenses are guaranteed by the owner or the owner's estate

Name: \_\_\_\_\_ Breed: \_\_\_\_\_

DOB: \_\_\_\_\_ Microchip #: \_\_\_\_\_ Tattoo #: \_\_\_\_\_

Markings: \_\_\_\_\_

Current Medications: \_\_\_\_\_

Allergies: \_\_\_\_\_

Veterinarian: \_\_\_\_\_ Phone #: \_\_\_\_\_

Please make sure a leash is on the dog before removing him/her from the crate.  
*See reverse side for contact information*

## Owner's Contact Information

Owner's Name(s): \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

## Emergency Contact Information

Name: \_\_\_\_\_

Phone #1: \_\_\_\_\_ Phone #2 \_\_\_\_\_

Name: \_\_\_\_\_

Phone #1: \_\_\_\_\_ Phone #2 \_\_\_\_\_

Name: \_\_\_\_\_

Phone #1: \_\_\_\_\_ Phone #2 \_\_\_\_\_

Name: \_\_\_\_\_

Phone #1: \_\_\_\_\_ Phone #2 \_\_\_\_\_

## Additional Information

Blank area for additional information.