



## Pack Leader, Plus... *Pet Profile Sheet*

Date Today _____	Pack Leader, Plus...Name _____	
Clients Name _____	Pets Name _____	
Breed _____	Colors _____	
M or F _____	Neutered or Spayed _____	Age _____
Is pet microchipped or has a tatoos? _____		

Explain pets reaction to strangers: \_\_\_\_\_  
\_\_\_\_\_

Does pet have restricted areas? Y or N Explain: \_\_\_\_\_  
\_\_\_\_\_

Does pet understand certain commands/words? List here: \_\_\_\_\_  
\_\_\_\_\_

What is pets favorite toys/activities? \_\_\_\_\_  
\_\_\_\_\_

Does this pet have any dislikes or things that scare them? \_\_\_\_\_  
\_\_\_\_\_

Favorite hiding places? \_\_\_\_\_  
\_\_\_\_\_

Type of food for meals: Dry      Wet      Both

Brands of food: \_\_\_\_\_

Amount to be fed at 1 meal: \_\_\_\_\_      Time? \_\_\_\_\_

Location of food: \_\_\_\_\_      Location of water: \_\_\_\_\_

Where does pet eat? \_\_\_\_\_

Feeding notes: \_\_\_\_\_

Describe any food or environmental allergies: \_\_\_\_\_  
\_\_\_\_\_

Describe any health problems/ diseases/ injuries/ past surgical history: \_\_\_\_\_  
\_\_\_\_\_

Is Pet taking any medications? List below. 1. Name med: _____ 2. Name med: _____ When: _____ When: _____
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Location of scooper or baggies for pick up of yard: \_\_\_\_\_

Location of scooper or baggies for walks: \_\_\_\_\_

\* Pack Leader, Plus... supplies equipment in case of emergencies\*

Location of litter box: \_\_\_\_\_ Extra litter: \_\_\_\_\_

Where is pets waste disposed of? \_\_\_\_\_

Where is lease/ collar located? \_\_\_\_\_

Notes for anything not covered: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_