



Life Planning Law Firm P.A.

Elder Law & Estate Planning

(941) 914-6000

FOR EMERGENCY CAREGIVERS OF MY PET

Thank you for agreeing to take care of my pets during an emergency if I am unable to do so. Below is all the information you'll need.

MY CONTACT INFORMATION

Name	
Address	
City, State, Zip	
Is there a Gate Code?	
Cell Phone #	
Home Phone #	

PET INFORMATION

Pet Name	
Type of Pet	
Breed	
Color & Markings	
Age	
Weight	
Microchip Number	

#1 EMERGENCY CONTACT FOR MY PET

Name	
Relationship	
Cell Phone #	
Home Phone #	
Other Phone #	

OTHER EMERGENCY CAREGIVERS FOR MY PET

Name	
Cell Phone #	
Other Phone #	



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OTHER EMERGENCY CAREGIVERS FOR MY PET

Name	
Cell Phone #	
Other Phone #	

VETERINARIAN

Name	
Address	
Office Phone #	
After Hours Phone #	
Directions to Office	

EMERGENCY VETERINARY CARE CENTER

Name	
Address	
Office Phone #	
After Hours Phone #	
Directions to Office	

BOARDING KENNEL or PET SITTER

Name	
Address	
Office Phone #	
After Hours Phone #	
Directions	



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CARE INSTRUCTIONS

Location of Items	
Location of Food	
Type of Food	
Store where food is Purchased	
Location of Medication	
Outside Potty Schedule	
Favorite Toys or Games	

MEDICAL HISTORY & INFORMATION

Medical Conditions	
Prescriptions	
How to renew Prescriptions	
Medication Schedule	

DESCRIPTION of PERSONALITY & BEHAVIOR

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LONG TERM CARE ARRANGEMENTS

Location of Pet Trust	
Appointed Caregiver(s)	

OTHER IMPORTANT INFORMATION

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