NVADG Animal Care Schedule

Intake #_____

(Form to remain with animal!) (Return **Care Schedule** with clipboard to Intake when animal is released.)

OWNER	Last Name:	First Name:

Description of animal

	Name	Species	Breed	Color/markings	Gender	ID (collar/tag/etc.) DESCRIBE
					☐ Male ☐ Female ☐ Spay/Neuter ☐ Intact	

List medical problems, necessary medications, or dietary needs? **Include time & method normally administered and any other details.**

List behavioral characteristics of which we should be advised.

SPECIAL INSTRUCTIONS: **Under Vet Care** ☐

Picture YES _____

RECORD (Use the current time to record Walked, Fed and Cage Cleaned)

Date	Walked	Fed	Cage Cleaned	Comments

Revised 5/21/0214

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Intake #_____

RECORD (Use the current time to record Walked, Fed and Cage Cleaned)				
Date	**Walked**	**Fed**	**Cage Cleaned**	**Comments**

Revised 5/21/0214