## **Emergency Care Directive for My Pet(s)**

Name:		
Address:		
City:	State:	Zip:
Phone (Home)	(Work)	(Cell)

## In case I am incapacitated or in case of my death, please honor the following requests concerning my pet(s). You will be reimbursed for any phone and/or transportation expenses.

## It is likely that my pet(s) are at home and will need immediate attention.

Please notify the following individuals immediately:

Name :			
Address :			
Phone : (Home)	(Work)	(Cell)	
Name :			
Address :			
Phone: (Home)	(Work)	(Cell)	

If I am traveling away from home, please have the pet(s) cared for by the nearest reputable boarding kennel until arrangements can be made to get them home. If they are injured and need emergency care, please transport them to the nearest reputable veterinarian or emergency animal hospital. All expenses will be taken care of by me or my designated representative.

/eterinarian:	
Name :	
Clinic:	_
\ddress:	_
Felephone:	

Dr.\_\_\_\_\_\_ is authorized to make a decision concerning the welfare and treatment of my pet(s). If they are injured beyond hope of recovery, please humanely euthanize them and have their bodies cremated. The ashes are to then be forwarded to my Veterinarian for pick-up at a later date.

Signed :	Date:
Print Name:	
Witness :	Date:
Print Name:	