# IN CASE OF AN ACCIDENT/EMERGENCY

(Place this page in your automobile, RV, or whatever vehicle you may be driving or on your person when you are traveling with your dogs.)

In the event that I am incapacitated and unable to make my wishes known regarding my dog(s), please honor the following requests:

The welfare of my dog(s) is my primary consideration.

#### Contact as soon as possible: \_\_\_\_\_

Day Telephone Number:

Night Telephone Number: \_\_\_\_\_

Cell Telephone Number: \_\_\_\_\_

## If they cannot be reached, Please Contact:

Day Telephone Number:	
Night Telephone Number:	
Cell Telephone Number:	

### All expenses for the dog(s) will be guaranteed by these contact people.

If my dog(s) is not injured, they are to be cared for by the nearest reputable boarding kennel, and be kept in the best possible manner until arrangements can be made to get them home.

If my dog(s) is injured, they are to be cared for by the nearest reputable veterinarian. I prefer that my veterinarian be contacted regarding decisions on my dog(s) care and treatment. They have all of my dog(s) medical records available.

#### Contact my veterinarian:

Day Telephone Number: \_\_\_\_\_

Night Telephone Number: \_\_\_\_\_

Emergency Telephone Number: \_\_\_\_\_

If my dog(s) is injured beyond all hope of recovery, my dog(s) is to be humanely euthanized. Photographs and descriptions of my dog(s) are attached, as are their health and vaccination records. For identification purposes, my dogs are either tattooed on their \_\_\_\_\_\_ with a tattoo number or are micro-chipped and can be identified by a reputable veterinarian.

## I want to emphasize that the welfare of my dog(s) is my primary consideration.

Signature:	
Date:	
Name:	 
Address:	
	_ Zip:
Day Telephone Number:	 
Work Telephone Number:	 
Spouse/Significant Other:	 
Parents:	 