BULLAR TREE QUESTIONNAIRE

Whilst your pet is in our care, every effort will be made to ensure their safety & comfort. In order for us to provide the best service possible & keep as close to their usual routine as possible, please complete this questionnaire as fully as possible so that we can get to know them from your perspective before meeting them ourselves:

Owners Name & Address:			
Pets Name:	Breed:		
Age or DOB:	Sex:	Neutered	Y/N
Microchip No:			
Vet Details:			
What do you feed your pet & how often?		 	
Are they allowed treats? Y/N Any allergies?			
Does your pet ever mess or chew their own bedding	? Y/N		
Is your pet ever aggressive towards other animals?	Y/N		
Is your pet ever aggressive with strangers?	Y/N		
Does your pet mind being dried with a towel?	Y/N		
Does your pet enjoy being fussed & cuddled?	Y/N		
Do they have a favourite exercise activity?	Y/N		
Details			
Does your pet have any 'strange' habits?	Y/N		
Details			
Is there anything else you feel we need to know aboneed to pass on:	•	•	you