

Brooklyn Park Pet Hospital
Pre-Purchase Pet Questionnaire

Date: _____

The goal of a pre-purchase counseling session is to help match an owner's pet preferences with their lifestyle and expectations.

Last Name: _____ First Name: _____

What type of pet are you interested in? (Dog/Cat/Small Mammal) _____

Do you have a preference on the age of the pet? (Puppy/Kitten/ Young Adult/Mature Adult) _____

Do you want a pet that is non-shedding? _____

Expectations on grooming needs? Rare/Moderate/Demanding _____

Size of pet desired? (Small/Medium/Large) _____

Who would be responsible for the pet? _____

Amount of exercise offered? (Daily walks/Running with pet/Yard only/Inside Play/Other) _____

Energy level wanted? (Low/Medium/High) _____

Time spent at home? Weekdays _____ Weekends _____

List any activities you want to do with pet? (Hunt/Family pet>Show/Agility/Service dog/Skijoring/Other)

Children in the home? _____ Ages? _____

List current pets at home: Species/Age

List previous pet? Species
