

For Amarillo MOW Office Use Only						
Route #:	Date Contacted Vol.					
Created Route Date:	_					

Client Name:	me: Renewal Assessment? Y N												
Address:													
Zip Code:													
Phone Number:													
TOTAL # OF DOGS IN HOME:													
	Dog #1			Dog #2				Dog #3			Dog #4		
Name of dog													
Size of dog (circle one)	Sm	Med	Lar	Sm	Med	Lar	Sm	Med	Lar	Sm	Med	Lar	
Age of dog													
Spayed or neutered? (circle one)	Ye	:S	No	Y	es	No	Y	es	No	Y	es	No	
Is pet seen annually by vet? Would you like pet to see vet?	Ye Ye		No No		es es	No No		es es	No No		es es	No No	
Vet services being requested.													

TOTAL # OF CATS IN HOME: ____

Cat #1 Cat #2 Cat #3 Cat #4 Name of cat Age of cat Spayed or neutered? (circle one) Yes No Yes No Yes No Yes No Is pet seen annually by vet? Yes No Yes No Yes No Yes No Would you like pet to see vet? Yes No Yes No Yes No Yes No Vet services being requested.

DONATED PET FOOD WAIVER & ANIMEALS ON WHEELS AGREEMENT

- AniMeals is only a supplemental pet food program.
- A volunteer will deliver the pet food once a month and we cannot promise that it is delivered the same day every month.
- AniMeals will provide supplemental pet food for up to 4 pets total.
- All pet food received by AniMeals is donated by community members or purchased by Meals on Wheels and that Amarillo Meals on Wheels cannot be held liable for any direct, indirect, incidental, special, consequential, or exemplary damages.
- All pet food provided by AniMeals is provided on an "as is" and "as available" basis.

Assessor Name (Print):	Date:
ASSESSOI MAINE II HIILI.	Date.