



Lifestyle Assessment

First Name: _____ Last Name: _____

Phone #: _____ Cell #: _____

Living Arrangements: Rent / Own / Other: _____

If you are renting, are pets allowed in your building? Yes / No

If yes, what is your landlord's policy regarding pets?

This animal will be living: Indoors / Outdoors / Both

If outdoors, what type of shelter will the animal have? _____

How many people are living in the home? _____

Please list ages of any children under 18 living in the home: _____

Current pets in home(Gender, Breed, Age):

Do you have livestock on or near your property? Yes / No Type: _____

How would you characterize your lifestyle? Less Active / Somewhat Active / Very Active

What type of and how much exercise will you be able to provide for your pet? (Dogs)

Have you owned (been responsible for) a companion animal in the past? Yes / No

If Yes, please explain: _____

Are you aware of the bylaws of your city/town/municipality regarding the ownership and control of companion animals? Yes / No

Thank-you for completing the lifestyle assessment for the Pembina Valley
Humane Society!