

**PERMANENT GUARDIAN INFORMATION PAGE**

Full Name

Household size: \_\_\_\_ Adults \_\_\_\_ Children

Phone number

Children's ages:

Alternate phone number

Are you a veteran:

Email address

Do you have a disability:

Current address

Do you have access to reliable transportation:

Gender

Employer:

Age

Household income:

Race/ethnicity

Emergency Contacts: **\*\*In the event that you cannot be reached and your pets must be returned, PBH will attempt to return them to these people. PBH will contact the people listed below to confirm that they are able and willing to take your pets if needed.**

Name:

Relationship to Permanent Guardian:

Phone Number:

Email address:

Name:

Relationship to Permanent Guardian:

Phone Number:

Email address: