



# Pet Pantry Request Form

Curbside # \_\_\_\_\_

## Personal Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

## Household Information

How many dogs or cats do you have? Dogs: \_\_\_\_\_ Cats: \_\_\_\_\_

Number of people in your home? Adults: \_\_\_\_\_ Children: \_\_\_\_\_

## Pet Information

Pet							Additional space on back
						Fixed?	
1	Dog Cat	Name: _____	Breed: _____	Age: _____	Weight: _____	Y N	
						Fixed?	
2	Dog Cat	Name: _____	Breed: _____	Age: _____	Weight: _____	Y N	
						Fixed?	
3	Dog Cat	Name: _____	Breed: _____	Age: _____	Weight: _____	Y N	

## Needs

Reason for request:

Any special dietary needs:

Please initial below:

\_\_\_\_\_ I recognize that in receiving assistance in the form of donated pet food there exists risk of injury or sickness, including personal injury or harm to me, my pet(s) and others. On behalf of myself, my heirs, personal representatives and executors, I hereby release, discharge, indemnify, and hold harmless Friends of the Cuyahoga County Animal Shelter, and its agents from any and all claims, causes of actions of demands, of any nature or cause connected with my receipt of assistance in any form from Friends of the Cuyahoga County Animal Shelter.

\_\_\_\_\_ I understand that 1) Friends of the Cuyahoga County Animal Shelter has a limited amount of food available for animals in need; 2) the amount of food provided will be determined on a case by case basis, depending on availability and need; 3) food will be disbursed by delivery only, and a representative will establish a date and time to drop off food allocated to me; 4) based on demand, I will only receive a limited amount of food each month, and FCCAS cannot guarantee how much or how often it can provide food to me for the animals in my care.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_



# Pet Pantry Request Form

## Pet Information

4	Dog	Cat	Name: _____	Breed: _____	Age: _____	Weight: _____	Fixed? Y N
5	Dog	Cat	Name: _____	Breed: _____	Age: _____	Weight: _____	Fixed? Y N
6	Dog	Cat	Name: _____	Breed: _____	Age: _____	Weight: _____	Fixed? Y N
7	Dog	Cat	Name: _____	Breed: _____	Age: _____	Weight: _____	Fixed? Y N
8	Dog	Cat	Name: _____	Breed: _____	Age: _____	Weight: _____	Fixed? Y N

## Food Assignment (Staff Use Only)

DOG FOOD		CAT FOOD	
<b>DRY FOOD</b>			
5 lbs	35 lbs	5 lbs	35 lbs
10 lbs	40 lbs	10 lbs	40 lbs
15 lbs	45 lbs	15 lbs	45 lbs
20 lbs	50 lbs	20 lbs	50 lbs
25 lbs	55 lbs	25 lbs	55 lbs
30 lbs	60 lbs	30 lbs	60 lbs
<b>WET FOOD</b>			
12 Cans		12 Cans	
24 Cans		24 Cans	
36 Cans		36 Cans	
48 Cans		48 Cans	
Litter (if available)			

Received by: \_\_\_\_\_ Date: \_\_\_\_\_