Pet Trust Worksheet

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We'll use this completed worksheet along with a discussion with you to design a pet trust that meets your estate planning goals for your entire family – the furry and not furry ones too! If possible, please return the completed worksheet, along with a photo of your pet(s), to our office prior to your appointment.

Personal Information:
Tell us about yourself.
Name:
Address:
Home Phone:
Work Phone:
Cell Phone:
Email Address:
Pet Information:
Tell us about your pet(s), e.g. "Simon, cat."
1
2.
3.
4.
5.
<u>Caregiver:</u>
Tell us about the person you want to take care of your pet(s).
Name:
Address:
Phone:
Email Address:
Relationship:
Alternate Caregiver:

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Name:
Address:
Phone:
Email Address:
Relationship:
Alternate Caregiver:
Name:
Address:
Phone:
Email Address:
Relationship:
Instructions for Routine Care:
Tell us about the daily care of your pet(s).

Instructions for Medical Treatment:

Tell us about the routine medical tre	atment of your pet(s).	
Inctri	uctions for End of Life Car	·o.
<u>Ilisu (</u>	detions for End of Life Car	<u>e.</u>
Tell us about the end of life care you	would like for your pet(s).	
	Cook of Comm	
	Cost of Care:	
	Monthly	Annually
Food		
Medication		
Grooming		
Veterinary Care		
Pet Health Insurance*		
Boarding/Pet Sitting		
Toys and Treats		
Compensation to Caregiver		

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Total

^{*}If you have health insurance for your pet(s), please complete the section below and include a copy of your pet's insurance card:

Company:
Premium:
Coverage:
What should happen with any leftover money?
Briefly describe what you would like to happen with any money that's left over after your pet
passes away.