



Pets at Peace - Pet Loss and Memorial Services
 2375 Queen Street East, Toronto, Ontario M4E 1H2 416-699-9955
www.petsatpeace.ca

Preplanning with Pets at Peace

Pet owner: _____ Pet's name: _____
 Address: _____ Breed: _____
 _____ Present age: _____ Sex: _____
 Postal Code: _____ Colour: _____
 City: _____ Approx weight: _____
 Phone number: _____

I request that Pets at Peace -Pet Loss and Memorial Services carry out my final wishes for my beloved pet named above.

Package A _____ Package B _____ Package C _____

Urn included with each package: Ceramic - Rose ___ Blue ___ Tan ___ or Simply Oak _____

I may wish to choose another urn than the one provided or provide my own _____

Transfer from home or vet clinic _____

I may wish to transfer my pet to Pets at Peace on my own _____

I would like a paw print _____

I would like a fur clipping _____ (this might not be possible with short haired pets)

I request the return of surgical metals/leg bands (birds) _____

I authorize my Veterinarian Clinic (name and location)

to release my pet to the care of Pets at Peace.

I am the pet parent/guardian of above named pet and am fully authorized to make the above arrangements

Signed: _____ Dated: _____

****Please print off a copy for your records and email (info@petsatpeace.ca) or mail us a copy – thank you****