



# Guide Dogs for the Blind Puppy Sleepover Notes

Sleepover Dates: \_\_\_\_\_

Puppy's Name: \_\_\_\_\_

Puppy's GDB ID: \_\_\_\_\_

Puppy Date of Birth: \_\_\_\_\_

Intact? (last season, if applicable): \_\_\_\_\_

Raiser's Name: \_\_\_\_\_

Raiser's Phone #: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone #: \_\_\_\_\_

Vet Clinic Info (name, address, phone):	Is the puppy currently taking any medication? Instruction & notes:

## A Day in the Life

Mealtime! Food brand, how much, schedule, etc.

Bedtime! Routine, location, etc.

Potty Time! Relieving surfaces, schedule, etc.

House Manners: Loose in the home? YES Space? Crate?

Anything else (special toys packed, favorite treats, etc.)

**Thank you and have fun!**