



Pets at Peace – Pet Loss and Memorial Services

2375 Queen Street East, Toronto M4E 1H2 416-699-9955 www.petsatpeace.ca

Preplanning with Pets at Peace

Pet Guardian: _____ Pets Name: _____
Address: _____ Breed: _____
City: _____ Present Age: _____ Sex: _____
Postal Code: _____ Colouring: _____
Phone Number: _____ Approx weight: _____

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

Cremation Options:

Communal: _____ **Individual Compartment:** _____ **Private** _____

Urns included with Individual or Private selection: Ceramic – Rose ___ Blue ___ Tan ___
Cedar ___ Cedar Latch ___ Oak ___ Beige Metal ___ Dark Metal ___
Engraving: Yes ___ No ___

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 pawprint: _____ I would like a fur clipping: _____ 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 a copy for your records and email helen@petsatpeace.ca (Toronto) or sharon@petsatpeace.ca (Orillia) or mail us a copy – thank you