



# MASTER TRANSPORTATION CHECK LIST

**This information should be kept with the dog at all times and updated by each driver. Feel free to download and modify to meet your group's needs.**

Dog Name \_\_\_\_\_

Breed \_\_\_\_\_ Sex \_\_\_\_\_

Neutered \_\_\_\_\_ or Spayed \_\_\_\_\_ UTD on Shots \_\_\_\_\_

Health \_\_\_\_\_

Housebroken \_\_\_\_\_ Gets along with other animals \_\_\_\_\_

Is crate optional or mandatory? \_\_\_\_\_ Do drivers need to provide crate? \_\_\_\_\_

Special needs or comments \_\_\_\_\_

Dog last fed at \_\_\_\_\_

Time of last water and potty break \_\_\_\_\_

Overall assessment of the dog \_\_\_\_\_

Attach list of all CUR Drivers and Contact Information