

# Travel Health Certificate Questionnaire



Thank you for choosing Hillside Animal Hospital for your pet's travel needs. International travel requirements can be quite variable depending on the location. Please complete the following questionnaire and return it to us within 24 hours. It is important that the information you fill out on this form is **complete** and **accurate**. We will use this information to fill out the necessary paperwork for your pet. Further, we strongly recommend you research the destination country to make sure you have planned enough time to complete all necessary steps prior to your departure. Please know that some countries require 6-12 months planning. **Please note, incomplete forms will incur a \$20 processing fee in addition to our customary fees.**

Find updated information here:

[https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/export/iregs-for-animalexports/ct\\_iregs\\_animal\\_exports\\_home](https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/export/iregs-for-animalexports/ct_iregs_animal_exports_home)

**\*\*Hillside Animal Hospital will not be responsible for any inaccurate information provided by the client.\*\***

Pet's Name: \_\_\_\_\_ Canine  Feline

Has a microchip: Yes  OR No  | Microchip number: \_\_\_\_\_  
Microchip implantation date if known: \_\_\_\_\_

Where was the most-recent rabies vaccination done (if not here)? \_\_\_\_\_

*\*Provide ALL certificates for the entire life of pet unless you plan to booster the rabies vaccine\**

Date of most recent rabies vaccination: \_\_\_\_\_ Manufacturer: \_\_\_\_\_

Serial Number: \_\_\_\_\_ Duration: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Name of person traveling with pet: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_  
(City) (State) (Zip)

Date of departure: \_\_\_\_\_ Date of arrival at final destination: \_\_\_\_\_

Location of departure: \_\_\_\_\_ Location of final destination: \_\_\_\_\_

Will you be stopping anywhere other than the final destination: \_\_\_\_\_

How is your pet leaving the United States?

- a. Air – Direct Flight
- b. Air – Layovers in another country. List the country or countries your pet will land in before the destination country is reached: \_\_\_\_\_
- c. Car
- d. Train
- e. Boat – Direct
- f. Boat – Cruise ship – List all countries the cruise is stopping at: \_\_\_\_\_

Final destination address: \_\_\_\_\_

Phone number of final destination if different: \_\_\_\_\_

***This form must be completed and returned to Hillside Animal Hospital within 24 hours.***