



Service Animal Questionnaire

Wish Childs Name: _____

Handlers Name: _____

Villa Number: _____

Arrival Date: _____

Departure Date: _____

Please answer the following questions about your service animal:

1. Is the service animal required because of a disability?

Yes

No

2. What work or task(s) has the service animal been trained to perform?

Signature of handler or guardian: _____

Date: _____