

# Additional Questions Form

Pet Name <small>(first and last name as it appears on data sheet)</small>	Brand and Type of Food Fed  <small>(e.g. ABC Senior Light Food)</small>	Amount of Food Fed Daily  <small>(8 oz. cups, cans and size)</small>	Treats  <small>Y=Yes N=No</small>	Treat Brand(s)	# of Times per Day You Give Treats  <small>1=Once 2=Twice 3=3+</small>	# of Treats you Give Each Time	Do you exercise your pet?  <small>Y=Yes N=No</small>	How many days a week do you exercise your pet?  <small>(1-7)</small>	How do you exercise your pet? <small>(check all that apply)</small>					How many minutes per day do you exercise your pet? <small>(minutes)</small>  <small>A=&lt;10 B=10-15 C=15-20 D=20-25 E=25-30 F=30+</small>	Do you think pet obesity is a problem in the US?  <small>Y=Yes N=No</small>
									Walk	Jog, Run	Outside alone, Unsupervised Play	Play Ball, etc.	Other		