



Boarding Check-In Form

Owner Name: _____ Pet Name: _____

Boarding Dates: _____ to _____ Pick Up Time: _____ (Boarding dog check out time is 12:00pm, \$25 daycare charge will be applied for late pick up. Fee is waived if you dog has Grooming/Bath appointment on check out day)

Bathing/Grooming for Boarding Pet (Charges depend upon size of pet. Includes nail trim and ear cleaning.) (what day/time you want us to groom/bathe your dog) _____

Bath (circle one)? Yes No

Hair Cut (circle one)? Yes No

Emergency Contact: _____ Emergency Phone: _____

Boarding Pet's Food Circle one

Food provided by Hotel (\$5/meal)

My own food: _____

Is your dog allergic to any food _____

Feed my pet (circle one):

Once a day (AM or PM)

2 times a day

3 times a day

Amount of food given **PER MEAL** _____ Amount of food given **PER DAY** _____

Boarding Pet's Medication:

Is boarding pet on medication? Yes No

Has he/she had all of today's medication(s)? Yes No

Name of Medication: _____ Directions: _____

Name of Medication: _____ Directions: _____

Boarding Pet's Personal Belongings While we do our best to return items left with your pet at the time of discharge, occasionally items can be misplaced. Therefore, we cannot accept responsibility for leashes, toys, blankets, etc. that may be lost while your pet is boarding. If you would still like to leave any personal belongings, please provide us with a list below:

(continued on back)

Health Questions Does your pet have any pre-existing medical problems we should be aware of?

Is there any other thing that we need to know about your pet that would help us? (Afraid of thunder storms, fractious, separation anxiety, etc.)

_____ H
Has your pet been ill or showed any signs of illness in the past 2 to 4 weeks? If so, please explain.

Authorization for Release of Pet to a Person Other Than Owner If someone other than the owner is to pick up a pet from boarding, please let us know when that pet is brought in. We will not release an animal to someone other than the owner without prior authorization from the owner.

Person's Name: _____ Phone Number: _____

Signature _____ Date _____