



BOARDING CHECK-IN FORM

Your Last Name: _____
 Emergency Phone#: _____

YOUR INITIALS HERE: _____, I have previously been informed of the boarding rules and regulations.

Pet's Name: _____ Dates: From _____ To _____ Pick Up Time: _____ AM/PM

ADDITIONAL NIGHT CHARGED IF PICKUP IS AFTER 12PM

CLIENT REMINDERS:

1. **Anxious pets** may be given **TRAZADONE**, by doctor, as a calming agent (**this drug is very safe and effective**).
2. **\$ ADDITIONAL NIGHT CHARGED IF PICKUP IS AFTER 12PM. If requested, late checkout would be at 1PM*******
3. **DOGS REQUIRE:** Canine-Rabies, DA2PP, Bordatella/kennel Cough (6 months), one negative fecal test (1 year).
4. **CATS REQUIRE:** Feline-Rabies, FVRCP, one negative fecal test (1 year).
5. **\$ There is an additional \$15 per pet holiday boarding charge** for the following major holiday days: **New Years Eve, New Years Day, July 4th, Memorial Day, Labor Day, Thanksgiving Day, Christmas Eve, Christmas Day.**

CAT CONDOS	MEDIUM	LARGE	DOUBLE-MEDIUM	DOUBLE-LARGE
DOG CONDO CAGES	SMALL	MEDIUM	LARGE	
DOG LUXURY SUITES	MEDIUM	LARGE	EXTRA-LARGE	

KENNEL SHARING: NO / YES If yes, please list the other pet's name(s): _____

FEEDING Frequency: How often? • **Once daily (AM)** • **Once daily (PM)** • **Twice daily** • **Free Feed**

FEEDING Quantity: How much? _____ (measured in **8oz cups**)?

Did you bring your pet's food? NO / YES **Has your pet eaten today (if Yes, what time)?** _____

YOUR BELONGINGS: Please list any belongings you will be leaving with us (be descriptive):

	Leash/Collar	Bed/ Blanket	Carrier	Toy/Treat	Food/Container	Other
List and Describe all Items						

YOUR PET'S TEMPERAMENT: Anything we need to be aware of. For example: aggressive dog, fence jumper, will bite, etc.

MEDICAL CONDITIONS (Ongoing or Recent Issues):

Does your pet(s) have any medical condition(s) or current illness (**cough, fleas, diarrhea, vomiting, sneezing**)? **NO / YES**
 If yes, please list: _____

MEDICATIONS: Please list all medications and directions: Administer: 1x Day: \$4.00 ≥2x DAY: \$8.00

- 1.) _____
- 2.) _____
- 3.) _____

REQUESTS/VETERINARY CARE: Will your pet see the veterinarian for medical reasons while boarding? Please state reason(s).

TENDER LOVING CARE EXTRAS: \$ Costs additional so please ask for pricing if needed

Bath	Groom	Additional Privacy Suite	One-On-One Playtime (20 minutes)	Two Extra Walks (Total 5 Daily)	Treat/Toy/Ice Cubes \$	Laser Playtime with Cat
\$	\$	Cats: \$3.50/Day	CATS: \$7/Day DOGS: \$18/Day	DOGS: \$8/Day		

****Note: Groom (appointment only) **Authorized Alternate Pickup Person (Full Name):** _____

Thank you for giving us the opportunity to care for your pet while you are away.
 To ensure the best care possible, please take the time to fill in this form completely. Thank you!