

BOARDING CHECK IN SHEET

OWNERS NAME: _____

PET'S NAME: _____

PHONE #: _____

VET'S NAME: _____

DROP OFF DATE: _____

PICK UP DATE: _____

FEEDING INSTRUCTIONS: _____

PICK UP TIME: _____

IF MULTIPLE PETS IN SAME ROOM, SEPARATE TO FEED?
(CIRCLE ONE) YES NO

MEDICATION: _____

BELONGINGS: _____

ADDITIONAL WALK: (3 are already included) YES NO (\$7 per walk)

_____ ONCE
_____ EVERY OTHER DAY
_____ EVERY DAY
_____ EVERY DAY EXCEPT 1ST DAY
_____ EVERY DAY EXCEPT LAST DAY
_____ EVERY DAY EXCEPT 1ST & LAST DAY

EXIT BATH: YES NO

Small: \$15-\$20
Medium: \$25-\$30
Large: \$35-\$40

NAIL TRIM: YES NO
\$20

DAYCARE WITH BOARDING MUST HAVE PASSED TEMPERMENT TEST YES NO

HALF DAY (\$11) FULL DAY (\$20)

_____ ONCE
_____ EVERY OTHER DAY
_____ EVERY DAY
_____ EVERY DAY EXCEPT 1ST DAY
_____ EVERY DAY EXCEPT LAST DAY
_____ EVERY DAY EXCEPT 1ST & LAST DAY

DO YOU WANT A TEMPERMENT TEST? YES NO (MUST BE SPAYED OR NEUTERED OVER 6 MONTHS OLD)

Will need to fill out required paperwork

We will make every effort to supply your pet with the beds, blankets, toys, balls, etc. that some pet owners bring with their pet. Due to multiple factors we may not place all of those items in the rooms with them.

Thanks for your understanding.

SIGNATURE: _____

DATE: _____

STAFF: _____