



Boarding Form

Owner _____ Pet _____

Email _____ Primary Contact # _____

Boarding Dates: _____ - _____ Pickup Time: _____

Emergency Contact (Name and Number) _____

PLEASE NOTE:

MONDAY - SATURDAY PICKUP IS BY NOON OR YOU WILL BE CHARGED AN ADDITIONAL NIGHT

THERE IS A \$25 SUNDAY PICKUP FEE. PICKUP IS ONLY 3-5PM

ALL HAIR CUTS WILL RECEIVE A TEXT WHEN COMPLETE

Medications – MUST BE IN ORIGINAL PRESCRIPTION BOTTLE

****Administration fees apply****

<u>Medication/Treatments (please include dosage)</u>	<u>Directions</u>
1)	
2)	
3)	
4)	
5)	

NOTES/MEDICAL CONDITIONS:

DIET

****All Food Must be Pre-bagged if staying less than 10 days or \$20 bagging fee will be applied****

<u>Type</u>	<u>Directions</u>
<input type="checkbox"/> Kennel Food	
<input type="checkbox"/> Own Food (Pre-bagged less than 10 days)	

NOTES:

BELONGINGS (LIMIT 2)

****Please Note: For health reasons we do not permit any soft toys or bedding.****

<u>Belonging:</u>	<u>Detailed Description</u>

NOTES:

A LA CARTE SERVICES

Fees Apply for all Activities. Please check website for current rates

TREATS - Please write the quantity next to item

Qty ___ Pig Ears (\$3)	Qty ___ Small Filled Bone (\$5)	Qty ___ Large Filled Bone (\$7)
Qty ___ Knuckle Bone (\$8)	Qty ___ Small Marrow bone (\$5)	Qty ___ Large Marrow Bone (\$7)
Qty ___ Filled Hoof (\$5)	Qty ___ Extra Large Marrow Bone (\$9)	

BOARDING ADD ONS – Prices are Per Individual Session

Services	Options			
2 hours group play (\$10)	<input type="checkbox"/> Daily	<input type="checkbox"/> Every Other Day	<input type="checkbox"/> Every 3 rd Day	<input type="checkbox"/> Other
Full Day group play (\$15)	<input type="checkbox"/> Daily	<input type="checkbox"/> Every Other Day	<input type="checkbox"/> Every 3 rd Day	<input type="checkbox"/> Other
15 Minute 1-on-1 (\$10)	<input type="checkbox"/> Daily	<input type="checkbox"/> Every Other Day	<input type="checkbox"/> Every 3 rd Day	<input type="checkbox"/> Other
Frozen Yogurt Treat (\$3)	<input type="checkbox"/> Daily	<input type="checkbox"/> Every Other Day	<input type="checkbox"/> Every 3 rd Day	<input type="checkbox"/> Other
Extra Potty Breaks (\$3/\$5)	<input type="checkbox"/> 1 extra per day (\$3/day)		<input type="checkbox"/> 2 extra per day (\$5/day)	
Dog Licensing	<input type="checkbox"/> Lifetime License		<input type="checkbox"/> Lifetime License + Micro-chip	
<input type="checkbox"/> Veterinary Services (you will be provided an additional form at drop off)				
Notes:				

DEPARTURE SERVICES

Clean up Bath (bath & dry, no brushout)	Nail Trim	Nail Grind	Teeth Brushing
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DELUXE BATHING & STYLING - Includes nail trim, ear cleaning, and *light* brushing

NOTE: ALL HAIRCUTS REQUIRE DELUXE BATH AND WILL RECEIVE A TEXT WHEN COMPLETE

<input type="checkbox"/> Deluxe Bath	<input type="checkbox"/> Nail Grind	Teeth Brushing	Ear Plucking
	<input type="checkbox"/> De-Shed Treatment	<input type="checkbox"/> Extra brushing	Oatmeal Shampoo
	Whitening Shampoo	Flea & Tick Shampoo	De-skunk Shampoo
<input type="checkbox"/> Hair Cut	<input type="checkbox"/> Puppy cut (all one length)	<input type="checkbox"/> Breed Style Cut	<input type="checkbox"/> Sanitary Trim
Heavy Shedding, matted, and double coated breeds will require extra brushing fees			
NOTES:			

Signature (required) _____

Please return completed form by email or bring a copy at drop-off

****OFFICE USE ONLY** - DO NOT FILL OUT**

In the past 24 hours has pet experienced coughing, sneezing, vomiting, diarrhea, decrease in appetite, lethargy, decrease in energy, or any other medical issue? YES NO

If yes please explain: