**Text

Description automatically generated with medium confidence**

**BOARDING CHECK-IN FORM**

**Pet Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pet Breed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Boarding Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Please Note: Pick-up and drop-off times on Saturdays and Sundays are 9:00am-11:00am ONLY***

**Owner Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Emergency Contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Feeding Instructions**

Boarding Pet’s Food(Circle one) My own food / Kennel provided food (add’l charge $3.50-$4.50 by size)

**Feed my pet** (Circle one) Once a day (Specify AM or PM) / Twice a day / Three times a day / Free feed

**How Much? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Allergies?** \_\_\_\_\_\_\_\_\_\_

*If your pet has not eaten for 3 meals (or two full days) you authorize our staff to administer ‘Hospital diet EN canned food’ ($4.70 per can). After two cans we will contact you.* ***Please initial authorization- \_\_\_\_\_\_\_\_\_\_\_\_\_***

**Optional Add Ons**

Would you like your pet to receive **Bakery Treat Cookies ($2.50 each)** (Circle one)Yes / No

**How Often?** Circle days: MON / TUES / WED / THURS / FRI / SAT / SUN

Would you like your pet to receive **Licking Mats ($4 each)** (Circle one)Yes / No

**Preference:** Peanut butter Pumpkin Plain Yogurt

**How Often?** Circle days: MON / TUES / WED / THURS / FRI / SAT / SUN

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Dog Daycare =*** *Monitored group play*(There is no dog daycare on weekends!)

(Circle one) Yes / No  **Half Days** - $18 /day / **Full Days** - $24 /day

Circle days: MON / TUES / WED / THURS / FRI

***NEVER BEEN TO DAYCARE BEFORE?* *Would you like your dog evaluated for Dog Daycare ($25 for 4 hours)?*** (Circle One)Yes / No ***Please note:*** *Not every pet is a good fit for group play and may not pass evaluation*

***Playtime =*** *20 Minutes Solo play with an employee* ***Enrichment =*** *Brain Games*

Would you like your pet to have **Individual Playtimes** ($15/20 min or $42 for 3 sessions)?

(Circle One)Yes / No Circle days: MON / TUES / WED / THURS / FRI / SAT / SUN

Would you like your pet to have **Enrichment Sessions** ($10 each or $25 for 3 sessions)?

(Circle One)Yes / No Circle days: MON / TUES / WED / THURS / FRI / SAT / SUN

**If your pet needs MEDICATION, please TURN SHEET OVER**

Pet’s Medication Instructions

**Pet’s Name Receiving Medication (If Multiple): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Boarding Pet’s Medication ($4.00 per day): Will your pet require medication?** Yes / No

**Have they received today’s dose?** (Circle one)Yes / NoWhich dose(s)? **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Medication **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Instructions **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Medication **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Instructions **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Medication **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Instructions **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Medication **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Instructions **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Medication **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Instructions **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Will your pet require Diabetic Care ($6.00/day)?** (Circle one) Yes / No **\_\_\_\_\_\_# of units \_\_\_\_\_ times per day**

**\_\_\_\_\_\_ initial *Please note:*** *We do our best to return boarding pets’ belongings, but occasionally items do get destroyed or go missing. As a result of this we cannot accept responsibility for leashes, bowls, blankets, toys, beds, etc. that may be damaged while your pet is boarding at our facility. You may list your pet’s belongings on the back of this sheet if you wish*