



MURPHY KENNELS BOARDING CHECK-IN FORM

Pet Name _____ Pet Breed _____ Boarding Dates _____

*Please Note: Pick up 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 (additional charge \$4-\$6 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 may authorize our staff to administer 'Hospital diet EN canned food' (\$4.34 per can). After two cans we will contact you. **Please initial authorization-** _____*

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 (\$3 each)** (Circle one) Yes / No

Preference: Peanut butter Pumpkin Plain Yogurt

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

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

(Circle one) Yes / No Half Days- \$15 /day / Full Days- \$20 /day

NEVER BEEN TO DAYCARE BEFORE? Would you like your dog evaluated for Dog Daycare (\$20 for 4 hours)?

(Circle one) Yes / No **Please note:** Not every pet is a good fit for group play and do not pass evaluation

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

Would you like your pet to have **Individual Playtimes** (\$10/20 min)? (Circle One) Yes / No

Would you like your pet to have **Enrichment Sessions** (\$9 each or \$22 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

Call or speak with us for **Grooming availability, Dog training, and Puppy classes!** (636) 677-8555 ext. 2.

Pet's Medication Instructions

Pet's Name Receiving Medication (If Multiple): _____

Boarding Pet's Medication (\$2.25 per day): Will your pet require medication? Yes / No

Have they received today's dose? (Circle one) Yes / No Which dose(s)? _____

Medication _____ Instructions _____

Medication _____ Instructions _____

Medication _____ Instructions _____

Medication _____ Instructions _____

Will your pet require Diabetic Care (\$5.25/day)? (Circle one) Yes / No _____ # of units _____ times per day

Pet's Name Receiving Medication (If Multiple): _____

Boarding Pet's Medication (\$2.25 per day): Will your pet require medication? Yes / No

Have they received today's dose? (Circle one) Yes / No Which dose(s)? _____

Medication _____ Instructions _____

Medication _____ Instructions _____

Medication _____ Instructions _____

Medication _____ Instructions _____

Medication _____ Instructions _____

Will your pet require Diabetic Care (\$5.25/day)? (Circle one) Yes / No _____ # of units _____ times per day

_____ **initial** ***Please note:** We do our best to return boarding pets' belongings, but items do occasionally get destroyed or go missing, because 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.*