



Monday-Friday 7:45 am – 12:00 pm AND 2:00 pm – 4:00 pm

Saturday 7:45 am – 11:00 am

*Sunday 3:00 pm – 6:00 pm

(*Pick up only, must be prearranged and credit card on file)

****\$18.75 LATE DROP OFF/PICK UP FEE APPLIES IF OUTSIDE THESE HOURS INITIALS: _____**

Boarding Dates: Drop Off: _____ Pick Up: _____

Pet's Name: _____

Owner Name: _____ Email: _____

Address: _____

DOGGIE DAY CARE/SUN LOUNGE: Yes No

Circle day(s) you would like your dog in Doggie Daycare or the Sun Lounge (seasonal):

WEEK 1: MON TUES WED THURS FRI SAT **WEEK 2:** MON TUES WED THURS FRI SAT

MEDICATION(S):

There is a charge of \$9.00 per day to administer medications and supplements. Additional charges apply for SQ fluids or insulin. I have provided a written prescription for all medications and supplements to be given. I give permission to administer any provided tranquilizers/sedatives (ie, CBD oil). I consent to the administration of products not labeled for animal use (ie, peanut butter, baby food, coconut oil) that I have provided. **INITIALS:** _____

MEDICATION	QUANTITY	# OF TIMES PER DAY

HAS YOUR PET HAD MEDICATION(S) TODAY? YES NO What Time: _____ Next Dose Needed: _____

FEEDING:

Did you bring your own food? YES NO What kind: _____

CUPS per day: BREAKFAST _____ LUNCH _____ DINNER _____ (1 cup = 8 Ounces) Next Meal Due: _____

If applicable, do you prefer to have your pets kenneled together? YES NO

I understand and assume all responsibility for the risks associated with multiple animals in the same kennel **INITIALS:** _____

EMERGENCY CONTACT/EVACUATION INFORMATION (REQUIRED)

Primary Phone Number(s): _____ Secondary Contact: _____

BELONGINGS:

Our boarding facility requires a Bordetella vaccine be given every 6 months. Please initial that you have read and understand this policy **INITIALS:** _____ Owner approval for Bordetella vaccine to be given **INITIALS:** _____

SIGNATURE: _____

STAFF INITIALS _____