

BOARDING ADMISSION FORM

Owner's name: _____

Owner's phone number: _____

Pets name: _____

Emergency Contact name: _____

Emergency Contact number: _____

Drop off date: _____

Drop off time: _____

Pick up date: _____

Pick up time: _____

EXTRAS:

Please tick if you'd like any extra's during your pet's stay:

- Bath/blow-dry (from \$35)
- Extra daily walk (from \$15)
- Nail trim (if able to safely do so) (\$10)
- Ear Clean (\$5)
- Treats from the shopfront (prices vary – please pick)
- Puppuchino (\$3)

FEEDING INSTRUCTIONS:

AM: _____

PM: _____

MEDICATIONS:

AM: _____

PM: _____

PERSONAL ITEMS BOUGHT:

SPECIAL NOTES:

HEALTH:

Is your pet up to date with flea/tick and worm treatments: YES/NO

Is your pet up to date with C5 vaccination: YES/NO

Is your pet currently in good health: YES/NO

If any problem should arise with your pet whilst in our care, we need permission to treat your pet which may include a visit to our local trusted vet clinic – the Illawarra Animal Hospital in Figtree. We will make every attempt to contact you if there is an incident.

By signing this, you agree to CuddleCubs Pet Care terms and conditions.

Owner's Signature: _____

CuddleCubs Signature: _____

Date: _____