



Tails R Waggin'

BOARDING CHECK-IN

Owner's Name: _____ Phone: _____

Pet's Name: _____ Color & Breed: _____

Arrival Date: _____ Departure Date: _____

If you'd like to receive text messages, please provide the best contact number: _____

Pampered Pet Extras *(Extra Fees Apply)*

- One-on-One Playtime *(15 minutes of extra TLC)* Number of sessions: _____
- Daycare *(Evaluation and application required)* Number of days: _____
- Boarding Bath *(Please confirm availability with staff)*

Medications

Does your pet require any medication during their stay? YES NO

Feeding Instructions

- Kennel *(Purina EN dry)*
- Own

Instructions: _____ Times per day: _____

Belongings

1. Does your pet have any allergies? _____
2. Has your pet been coughing or sneezing, lethargic or had vomiting and diarrhea in the last 14 days? YES NO
3. Has your pet ever bitten a person or another dog? YES NO

If yes, please explain: _____

The following may pick up my pet(s) in my absence:

Name: _____ Phone: _____

Medical/Emergency Care Approval

In the event a noticeable medical situation of your pet is identified and you or your authorized emergency contact cannot be contacted, veterinary medical service will be provided at the owner's expense at our veterinary hospital, Total Bond Veterinary Hospital at Forestbrook, unless otherwise noted. Please advise which location you would prefer your dog to be taken to (must be within a 20 minute drive from Tails R Waggin'):

Veterinarian: _____ Phone: _____

PLEASE BE AWARE THERE WILL BE DAMAGE FEES IF YOUR PET CAUSES DAMAGES DURING THEIR STAY.

Owner Signature: _____ Date: _____

Thank you for entrusting us with the care of your pet.
We want your pets' experience with us to be an enjoyable one.