

# Petz & Palz Inn

840 Peterson St  
Spring Valley, MN  
507-346-2734  
petzandpalzinn@gmail.com

Daycare  
Check-in:

Pet's Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Daycare  
Arrival \_\_\_\_\_ Pickup Time AM  
\_\_\_\_\_ PM

Emergency Contact:  
Name: \_\_\_\_\_

Ph#: \_\_\_\_\_

Additional Pet(s) sharing kennel?  
\_\_\_\_\_

Cot:  Yes  No

\*\*\$10 rental fee is required for cot usage, upon departure, if cot is not in the same condition there is a cot fee of \$25

Are Vaccinations UTD?	UTD	NEED	Activity Level	Normal	Abnormal	Comments:
RV (required)	<input type="checkbox"/>	<input type="checkbox"/>	Eating/Drinking	<input type="checkbox"/>	<input type="checkbox"/>	
DHLPP (required)	<input type="checkbox"/>	<input type="checkbox"/>				
Bordetella (required)	<input type="checkbox"/>	<input type="checkbox"/>		YES	NO	
Additional Services:	YES	NO	Coughing/Sneezing/ Vomiting/Diarrhea	<input type="checkbox"/>	<input type="checkbox"/>	
Wellness/Exam	<input type="checkbox"/>	<input type="checkbox"/>	Medical Condition	<input type="checkbox"/>	<input type="checkbox"/>	
HWT	<input type="checkbox"/>	<input type="checkbox"/>	Allergies/Sensitivities	<input type="checkbox"/>	<input type="checkbox"/>	
Lyme Vaccine	<input type="checkbox"/>	<input type="checkbox"/>				
NT	<input type="checkbox"/>	<input type="checkbox"/>	Bite History	<input type="checkbox"/>	<input type="checkbox"/>	
AG	<input type="checkbox"/>	<input type="checkbox"/>	Destroy non-food objects	<input type="checkbox"/>	<input type="checkbox"/>	
			Any jumping fences/escaping yard	<input type="checkbox"/>	<input type="checkbox"/>	
Other Concerns:	<input type="checkbox"/>	<input type="checkbox"/>	Get along w/other animals?	<input type="checkbox"/>	<input type="checkbox"/>	
			Get along w/small children?	<input type="checkbox"/>	<input type="checkbox"/>	
			Blanket in Kennel	<input type="checkbox"/>	<input type="checkbox"/>	
			Personal Items/descriptions:			

Can we post your pet on FB? Yes No  
Would you like pictures sent to an email? Yes No

Email: \_\_\_\_\_

Owner Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**\*\*We can not guarantee that personal belongings such as beds, blankets, etc. will be clean when they leave. We will certainly try our best!\*\***

Kennel Assistant: \_\_\_\_\_

Uploaded?

Vaccines Given/Appt Made?

N/A