## **Playful Pooch** Boarding Check-In

Pet's First & Last Name:

Your Name:	Phone: _				
Emergency Contact:	Phone:				
Drop Off Date:					
Pick Up Date: Estin	Estimated Pick Up Time:				
Medications (all medications must be in their original conta	iner and be labele	d by a v	vet):		
Feeding Instructions (How many times a day do we feed the	em and how much	):			
★ Does your dog have any allergies (inc. Food Allergies) we If yes, what are they allergic to?	should know of?	<u>YES</u>	<u>NO</u>	(circle one)	
If your dog has loose stool while staying with us, we may offer pumpkin, probiotics, comfortable. If you prefer that we do not provide these options, please let us know.	or similar options to help	soothe the	eir stomach	and make them more	
Did you make this reservation using our online Client P	ortal?	<u>YES</u>	<u>NO</u>	(circle one)	
<u>If yes,</u> you may skip the next box of questions.					
Do we have permission to (circle one)					
Provide a bed for your dog?	Brought Own	<u>YES</u>	<u>NO, m</u>	y dog eats bedding	
Provide a Nylabone for your dog in their kennel?		<u>YES</u>	<u>NO</u>		
Provide food toppers or wet food if your dog is not eating?	?	<u>YES</u>	<u>NO</u>		
Provide our house food if your dog runs out of food?		<u>YES</u>	<u>NO</u>		
*Our house food is \$4 /day					
If you have 2 or more dogs boarding:					
Do you want your dogs to be in the same kennel?		<u>YES</u>	<u>NO</u>	(circle one)	
Can your dogs be fed together unattended?		<u>YES</u>	<u>NO</u>	(circle one)	
*Signature:	<del></del>				
Employee Section	ee Section Departure Time Before 11AM After 11AM				
Checked In By	Checked Out By				
After 11 am: Nights:	Suite:	Sun./H	oliday:		
Food: Grooming:					

<sup>\*</sup>If you have grooming scheduled the day of pick up, the groomer will text you after your pooches' appointment