

Boarding Check-In Form

Today my pet needs:

Pet(s) Name: _____

Emergency Contact: _____

Pick-Up Date: _____

_____ Breakfast

_____ Dinner

_____ Medication(s)

Activities: (select up to 3 activities per day - \$4/play session)

Walks 1x/day _____ 2x/day _____ 3x/day _____

Private Play 1x/day _____ 2x/day _____ 3x/day _____

Group Play 1x/day _____ 2x/day _____ 3x/day _____

** Please note any special instructions or physical restrictions your pet may have for the selected activity**

Items Being Left: (Items may not be returned or may be returned damaged)

Feeding Instructions: (please note we feed 2x/day)

How many cups *per meal*? _____

Brand/Protein @ home _____

_____ Own Food (brought from home)

_____ Longview-provided Food (**must select which variety below**)

_____ Chicken/Rice _____ Lamb/Rice

Special Feeding Instructions: _____

Medications:

Medication name: _____

Please check time in which med is given: AM _____ PM _____ 3x _____

Additional Grooming Services:

_____ **Full Groom** (Includes bath, brush out, nail trim and breed specific or custom trim)

_____ **Feather Trim** (Includes bath, brush out, nail trim and feather trim (i.e. Golden Retriever, Collie)

_____ **Exit Bath** (Includes bath only)

_____ **Nail Trim** (Includes nails only)

Can your pet receive a bedtime treat provided by Longview?

Yes, Please do! _____ No, my pet has allergies or their own treats _____

Special Instructions for boarding stay: _____

Please read & acknowledge the following policies:

- Business Hours M-F 8am-8pm, Sat 8am-4pm, Sun 9am-12pm & 4pm-7pm
- Holiday hours may vary, please inquire for specifics
- You will be charged for day of drop off and pick up, regardless of time
- Payment is due in full at time of pick up
- There is a \$35 fee for returned checks

By signing this paper, you acknowledge the above policies, as well as your boarding contract.

Signature: _____ Date: _____

Phone Number: _____