

Boarding Check-In Form

Today my pet needs:

- _____ Breakfast
- _____ Dinner
- _____ Medication(s)

Pet(s) Name: _____

Emergency Contact: _____

Pick-Up Date: _____

Activities: (select up to 3 activities per day - \$5/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 _____

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

Feeding Instructions: (please note we feed 2x/day, 3x Feeds are an additional \$1/day if over 1y)

How many cups *per meal*? _____ Brand/Protein @ home _____

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

_____ Chicken (\$1/meal) _____ Lamb (\$1/meal) _____ Salmon (\$1/meal) _____ Beef (\$1/meal)

_____ SD Sensitive Stomach-chicken (\$2/meal)

In case of any stress induced diarrhea:

CALL

E-MAIL

PERMISSION FOR FOOD and/or MEDICATION

A la Carte: (\$3 per one, \$10 for five) *PER DAY*

_____ Extra Belly Rubs _____ Stuffed Kong _____ Snuffle Mat _____ Puzzle Toy _____ Lick Mat

Medications:

Medication name: _____ Dosage: _____

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

IF MORE THAN ONE MEDICATION, PLEASE INCLUDE THEM ON THE BACK

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)

_____ **Bath, Brush, & Tidy** (Includes bath, brush out, sanitary, paw trim, and nail trim)

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

_____ **Nail Trim** (Includes nails only) *Price range: \$10-\$25*

_____ **Nail Dremel** (Filing of the nails) *Price range: \$5-\$10 (additional to Nail Trim Price)*

Grooming Instructions: _____

Approximate Pick Up Time: _____

Can your pet receive a bedtime treat provided by Longview?

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

Is your pet up to date on flea and tick prevention? YES NO

Please read & acknowledge the following policies:

- Business Hours M-F 8am-8pm, Sat 8am-4pm, Sun 12pm-7pm
- 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: _____

Email: _____

Phone Number: _____