



BOARDING CHECK-IN SHEET

- Checkboxes for services: Bath & Brush, Groomers Gratuity, Mid Bath, Brush Outs, Nails Only, Teeth Brushing Only, Flea Protection, Dog Collar, Name Tag, and Treats.

Arrival Date: \_\_\_\_\_ Time In: \_\_\_\_\_ Guardian's Name: \_\_\_\_\_

Pet(s) Name: \_\_\_\_\_ Training package: \_\_\_\_\_

Travel Destination: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Tel # \_\_\_\_\_

Name of Authorized Individual(s) Picking up Pet(s): \_\_\_\_\_ Tel# \_\_\_\_\_

Pet's Departure Date \_\_\_\_\_ Pick up Time: \_\_\_\_\_ (Please be specific with departure time)

Pet(s) picked up after 2 pm MON-SUN will have a Daycare fee of \$39

WE DO NOT ACCEPT: Leashes, Bowls, Toys, Bedding/Blankets, Bones, Rawhide/Bully Treats and Owner's Scoops.

Please describe ALL belongings coming in with your pet(s) for this visit: \_\_\_\_\_

Food Description: BRAND NAME /AMOUNT (Type of Container): \_\_\_\_\_

Morning Feeding: \_\_\_\_\_ + \_\_\_\_\_

Afternoon Feeding: \_\_\_\_\_ + \_\_\_\_\_

Evening Feeding: \_\_\_\_\_ + \_\_\_\_\_

Medications/ Supplements: \_\_\_\_\_

Allergies: Yes No

Purchase IN-HOUSE BRAND dog food

Note: Our in-house Brand of food is Natural Balance.

CIRCLE ONE: (Venison/Potato), (Chicken/Sweet Potato), (Fish/Sweet Potato), (Lamb/Brown Rice), (Duck/Potato)

Is your dog currently on Flea Treatment? YES (DATE APPLIED) NO

Check-In Weight: \_\_\_\_\_ Guardian or Authorized Agent's Signature: X \_\_\_\_\_

Additional Notes:

Blank lines for additional notes.



**BOARDING CHECK-IN SHEET**

**CHECK-IN Attendant's Use Only**

**Dog(s) Checked over by:** \_\_\_\_\_

**Checked in by:** \_\_\_\_\_

Condition of: \_\_\_\_\_

Condition of: \_\_\_\_\_

Condition of: \_\_\_\_\_

Eyes: \_\_\_\_\_ Ears \_\_\_\_\_

Eyes: \_\_\_\_\_ Ears \_\_\_\_\_

Eyes: \_\_\_\_\_ Ears \_\_\_\_\_

Skin/Coat: \_\_\_\_\_

Skin/Coat: \_\_\_\_\_

Skin/Coat: \_\_\_\_\_

Weight \_\_\_\_\_ Locker # \_\_\_\_\_

Weight \_\_\_\_\_ Locker # \_\_\_\_\_

Weight \_\_\_\_\_ Locker # \_\_\_\_\_

**CHECK OUT**

Condition of: \_\_\_\_\_

Condition of: \_\_\_\_\_

Condition of: \_\_\_\_\_

Eyes: \_\_\_\_\_ Ears \_\_\_\_\_

Eyes: \_\_\_\_\_ Ears \_\_\_\_\_

Eyes: \_\_\_\_\_ Ears \_\_\_\_\_

Skin/Coat: \_\_\_\_\_

Skin/Coat: \_\_\_\_\_

Skin/Coat: \_\_\_\_\_

Weight \_\_\_\_\_ Locker # \_\_\_\_\_

Weight \_\_\_\_\_ Locker # \_\_\_\_\_

Weight \_\_\_\_\_ Locker # \_\_\_\_\_

**Belongings checked out by:** \_\_\_\_\_

**K9 Tech Signature:** \_\_\_\_\_

**Guardian Signature:** \_\_\_\_\_

**Please list belongings below (be detailed!):**