



IT TAKES A VILLAGE TO RAISE A PET  
BOARDING CHECK-IN FORM

DOG'S NAME(S): \_\_\_\_\_ OWNER'S NAME(S): \_\_\_\_\_

DROP OFF DATE & TIME: \_\_\_\_\_ PICK UP DATE & TIME: \_\_\_\_\_

ROOMING AND PLAYGROUPS (PLEASE CIRCLE):

ROOMING: SOCIAL[MULTI-DOG] ◊ FAMILY[2+DOGS, 1 OWNER] ◊ SINGLE ◊ PRIVATE [NO DOG CONTACT]◊SPECIAL NEEDS[MEDICAL]

PLAYTIME: SOCIAL DOG GROUPS \_\_\_\_\_ OR PRIVATE BOARD (NO DOG INTERACTIONS) \_\_\_\_\_

EXTRA SERVICES – INDICATE HOW MANY AND WHICH DAYS PREFERRED (IF APPLICABLE):

PARK TRIPS - \$15 EA: \_\_\_\_\_ BATH \$15-55[DEPENDING ON SIZE/COAT] \_\_\_\_\_

½ HR PRIVATE PLAY - \$20 \_\_\_\_\_ BRUSH OUT \$5-\$20[DEPENDING ON SIZE /COAT] \_\_\_\_\_

½ HR PRIVATE WALK - \$20 \_\_\_\_\_ NAIL TRIM \$12-20 [DEPENDING ON EASE] \_\_\_\_\_

TRAINING \$20/20 MIN SESSION; DESCRIPTION OF REQUESTED TRAINING: \_\_\_\_\_

WHERE ARE YOU STAYING? (CITY/STATE/COUNTRY) \_\_\_\_\_ BEST WAY TO REACH YOU? \_\_\_\_\_

ITEMS BROUGHT (DESCRIBE):

BED:COLOR, SHAPE, ETC \_\_\_\_\_ LEASH \_\_\_\_\_ OTHER \_\_\_\_\_

FEEDING INSTRUCTIONS

DID YOU BRING FOOD? \_\_\_\_ NEEDS CONTAINER? (\$4) \_\_\_\_\_ USE METRO DOG'S FOOD(\$2+ PER MEAL) \_\_\_\_ LUNCH (\$2) \_\_\_\_

AM:CAN / KIBBLE / RAW \_\_\_\_\_ PM:CAN / KIBBLE / RAW \_\_\_\_\_

MEDICATIONS: \$3 PER ADMINISTRATION

AM \_\_\_\_\_ MIDDAY \_\_\_\_\_ EVENING \_\_\_\_\_

TREATS OKAY? Y / N SPECIAL INSTRUCTIONS/FOOD ALLERGIES: \_\_\_\_\_

ANY CHANGES TO DOG'S BEHAVIOR AND/OR HEALTH: \_\_\_\_\_

PERSON TO CALL CASE OF AN EMERGENCY: \_\_\_\_\_ VETERINARIAN: \_\_\_\_\_

I HAVE READ THE UPDATED CONTRACT AND AGREE TO ITS TERMS X \_\_\_\_\_

STAFF USE ONLY:

ESTIMATED COST OF STAY: \_\_\_\_\_ PAID - Vi. MC.CA.CK.MD / UNPAID AT DROP OFF (CIRCLE ONE)

ADDITIONAL CHARGES INCURRED: \_\_\_\_\_

PRE-EXISTING BALANCE: \_\_\_\_\_ REMAINING BALANCE: \_\_\_\_\_ STAFF PERSON CHECK IN: \_\_\_\_\_ CHECK OUT \_\_\_\_\_