



WAGS 'N WHISKERS
comprehensive pet care

WAGS B&B: BOARDING

OFFICE USE ONLY:

Date: / / Expiration date: / /

Signature: _____

PET AND OWNER INFORMATION:

Pet Name: _____ Arrival Date: / / Departure Date: / /

Dog / Cat Spayed/Neutered: Yes / No Breed: _____ Age: _____

Owner's First and Last Name: _____

Address: _____ Email: _____

City: _____ Phone: (1) _____ (2) _____

State: _____ Zip: _____ Preferred Contact Method: Call _____ Text _____

EMERGENCY CONTACT INFORMATION (OTHER THAN OWNER):

Name: _____ Name: _____

Email: _____ Email: _____

Phone: _____ Phone: _____

Do you have your pet's vaccination records? Yes / No If no, please provide veterinarian's contact information:

Veterinarian's Name: _____ Phone: _____

**Please note, vaccination records are required for all pets in boarding. If records are not provided, a \$10 fee will be charged to your account to retrieve the records from the veterinarian.*

If my pet gets sick during stay: Call me _____ Text me _____ Call emergency contact _____ Call Wags on-call vet _____

Does your pet have health concerns? Yes / No Explain: _____

Does your pet have any allergies? Yes / No Explain: _____

Does your pet have medications? Yes / No Medication Name: _____

Do medications need to be administered while boarding? Yes / No Dosage: _____ Frequency: _____

Last administered dosage: _____ **Please note, a fee of \$3.50 per day, per pet will be charged to administer medications.*

While in boarding, I would like my pet to: Attend Camp Wags Daycare _____ Be Bathed _____ Be Groomed _____

Did you bring food?: Yes / No **Please note, if you do not provide food your pet will receive standard kennel food.*

Food brand: _____ Quantity per meal: _____ Frequency of meals: _____

Did you bring a bed? Yes / No Color: _____ Description: _____

Did you bring toys? Yes / No Quantity: _____ Description: _____

Did you bring a leash? Yes / No Description: _____

Are there any restrictions we should place on your pet's activities? Yes / No

Please explain: _____

If you have multiple pets, can they... Stay together? Yes / No Eat together? Yes / No

Signature: _____ Printed Name: _____ Date: / /