



Welcome to the Pet Resort at  
The Pet Vet on Patton

|                |
|----------------|
|                |
| Assigned Space |

**BOARD INFORMATION SHEET**

Pet Name:                      Breed:                      Color:                      Sex:                      Birthday:

Name of Owner/Guardian:

Phone Number:    Email Address:

Alternate Contact & Phone # (in case of emergency):

CHECK IN DATE: \_\_\_\_\_ CHECK OUT DATE: \_\_\_\_\_

- ❖ How often does your pet eat? 1x    2x    How many cups? AM:                      PM:
- ❖ Treat instructions: \_\_\_\_\_
- ❖ Does your pet have any food allergies? \_\_\_\_\_ Other allergies? \_\_\_\_\_
- ❖ Did you bring any of your pet's belongings?    If YES, please list: \_\_\_\_\_  
\_\_\_\_\_
- ❖ Is your pet on medication?    If YES, please list medication name and instructions: \_\_\_\_\_  
\_\_\_\_\_
- ❖ How is your pet feeling today? \_\_\_\_\_ Any coughing? \_\_\_\_\_ Any sneezing? \_\_\_\_\_
- ❖ Do you have any special instructions or is there anything we should know about your pet? \_\_\_\_\_  
\_\_\_\_\_
- ❖ May we have permission to take pictures of your pet to put on social media? \_\_\_\_\_
- ❖ Is your pet spayed/neutered? \_\_\_\_\_ For Intact Female Dogs: Date of Last Heat: \_\_\_\_\_
- ❖ Is your pet a fence jumper or an escape artist? \_\_\_\_\_
- ❖ Would you like your pet to participate in daycare? \_\_\_\_\_
- ❖ Would you like your dog to have a bath prior to picking them up? (\$42) \_\_\_\_\_
  - Would you also like them to have a brush out after the bath? (\$36) \_\_\_\_\_
  - Would you like to leave a tip for the daycare and resort providers? If so, please indicate amount \_\_\_\_\_
- ❖ Would you like us to provide emergency care if required? \_\_\_\_\_
- ❖ \*The Doctor determines what is considered an emergency. If there is a health concern with your pet, we will try to contact you first but if no return contact is made after a reasonable time, the doctor will proceed with necessary treatment at the owner's expense.
- ❖ WE MONITOR THE APPETITE OF EVERY PET BOARDING AT THE PET VET. IF ONE OF OUR BOARDING PETS DOES NOT EAT AN ADEQUATE AMOUNT OF FOOD WHILE HERE, AN ALTERNATE FOOD MAY BE OFFERED AT THE OWNER'S EXPENSE OF ~\$3 Per Can. **Owners initials:** \_\_\_\_\_
- ❖ PLEASE BE AWARE THAT WE CHECK EVERY PET FOR FLEAS UPON CHECK-IN. IF WE FIND FLEAS OR FLEA DIRT WE WILL AUTOMATICALLY GIVE THEM A FLEA BATH AT THE COST OF \$58, AFTER WHICH WE WILL TREAT YOUR PET WITH A FLEA MEDICATION OF THE DOCTOR'S CHOICE, WHICH YOU WILL ALSO BE CHARGED FOR  
**Owner initials:** \_\_\_\_\_

OVER----- >

- ❖ Please note: Dogs may, without warning, bite or cause injury to humans and other dogs. I acknowledge and understand that there are certain risks involved in participating in daycare, including but not limited to dog

**fights, dog bites to humans or other dogs, transmission of disease, and fence jumping. I acknowledge that if my dog is injured during interactions with other dogs I am financially responsible for care of my dog.**

**OWNERS SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

❖ **Staff Check for Fleas** \_\_\_\_\_