

Strawberry Hill Groom & Board
350 Westport Ave, Norwalk, CT 06851
Phone: (203)847-5875 Fax: (203)849-3015

Boarding Check-In Form

Date of arrival: _____

Departure Time: _____

(If possible, please schedule time for after 9am if you would like your pet bathed on departure date.)

Date of departure: _____

All of the vaccinations listed below are required for all pets who board with us. This helps protect your pet and other animals from contagious diseases. All boarding dogs must have a current vaccine status. If your pet was not vaccinated at our hospital, a signed Rabies certificate is required, along with confirmation of DHPP vaccine, Bordetella vaccine and a recent fecal sample result. If you cannot provide proof of vaccinations, your pets' vaccines will be updated.

Rabies Due: _____ DHPP Due: _____ Bordetella Due: _____ Fecal Due: _____

Feeding Instructions

We feed all boarders Eukanuba Low Residue dry and/or Triumph canned. If your pet is on a special diet, it must be provided.

OUR DIET **OWN DIET – Brand of food:** _____

Dry Canned How much? _____ How often? _____

Did your pet eat today? YES NO _____

Does your pet have any food allergies YES NO _____

Can your pet have milkbones? YES NO **OWN TREATS – Brand:** _____

Some dogs boarding together tend to be more aggressive during feeding time. If your are boarding multiple dogs together, can they be fed together at the same time or should they be separated during meals? **OK TO FEED TOGETHER** **SEPARATE TO FEED**

Bathing Instructions

With a MINIMUM OF TWO (2) NIGHTS BOARDING your pet will receive a **complimentary bath**. The complimentary bath *does not* include a full brushing, nail trim or ear cleaning. If you would like your pet to have a **FULL BATH** that includes the above, this is offered to you at a discounted price.

Would you like your pet to have a **FULL BATH** (including nail trimming, ear cleaning and brushing) before going home? **YES (Full long hair or under coat - \$35)** **YES (Full short hair \$29)** **NAILS ONLY** **Complimentary Clean up (offered after 2 nights boarding)** Notes: _____

Is your pet scheduled for a grooming while boarding? **YES** **NO**

If so, please specify instructions: _____

All boarders must be free of fleas and ticks. *If any are noticed on your pet, your pet will be treated at the discretion of the veterinarian on staff.*

Medical Conditions

Does your pet have any medical condition that we should know about? YES NO

If so, please let us know: _____

Is your pet on any medications? YES NO **If so, there will be an administration fee applied**

Name of medication(s)/Instructions: _____

Has your pet received any medications today? YES NO If so, which medications/last dose given? _____
 AM NOON PM

Accomodations

Our kennel will supply all necessary accommodations for your pet. You may leave personal belongings, however, because some dogs may soil or destroy their belongings, we cannot guarantee that they will be returned. please list belongings here: _____

Some dogs are inclined to chew or ingest objects such as blankets or bedding. Do we have permission to provide bedding for your pet YES, **BLANKETS OK** **STAND BED ONLY** **NO BEDDING**

Photo Release

Do we have your permission to take pictures of your pet (to put on our Facebook page, website or our waiting area) ? YES NO

Should the circumstances arise that my pet(s) remain unclaimed 5 days after the date which I have stated as the pick-up date, I understand that written notice will be mailed to the address on file. Ten days after such written notice the pet(s) will be transferred to a non-profit animal rescue organization for adoption. It is further understood that such action will not relieve me from paying all costs of your services and the use of your hospital, including the cost of boarding.

In case of illness or injury, I, the undersigned, do hereby give my consent for the doctors of Strawberry Hill Animal Hospital to treat, prescribe for, or operate upon my pet(s) while they are being boarded. I agree to be financially responsible for any veterinary care performed.

Who will be picking up your pet from boarding? _____

Emergency Number: _____ Emergency Contact: _____

I have read the foregoing and agree:

Signature of Owner/Representative of Owner: _____

Date: _____