

Guest Information

Owner Name _____ Date _____

In case of an emergency, whom should we contact? _____

HOURS FOR ARRIVAL Mon – Fri 7:30am – 6:00pm Sat 9:00am – 3:00pm	Arrival date ____ / ____ / ____ Day of week _____ Approximate time of arrival _____ am or pm
HOURS FOR CHECK-OUT Mon - Fri 7:30am – 6:00pm Sat 9:00am – 3:00pm Sun 3:00pm – 5:00pm	Check-out date ____ / ____ / ____ Day of week _____ Approximate time of check-out _____ am or pm SUNDAY CHECK-OUT MUST BE SCHEDULED WITH A RECEPTIONIST

Guest Name	Bathe	Extra Perks	Medication	Special Diet	Personal Belongings
1.	Yes No	Yes No	Yes No	Yes No	Yes No
2.	Yes No	Yes No	Yes No	Yes No	Yes No
3.	Yes No	Yes No	Yes No	Yes No	Yes No

- **Multiple Pets** - If you are bringing more than one pet, will they be boarded together in the same suite? **Yes No**

Should they be separated at feeding time? **Yes No** Do they share toys nicely? **Yes No**

- **Bath** – If you pet boards with us for more than three days, they will receive a **complimentary bath** unless you request otherwise.

- **Medication Instructions** – List the **medication, amount, frequency and when the last dose was given.**

- **Feeding Instructions** – Type of food _____

Amount to feed? _____ How many times daily? _____

- **Special Instructions** – _____

I have read and understand all of the policies and procedures for compliance with the boarding requirements for Resort For Pets regarding fleas/ticks & internal parasites, required vaccinations, pet illness policy, and payment policy. For the protection of all of our guests or in the event of an emergency, previously initialed policies will determine the course of action and/or treatment for your pet while under the care of Resort For Pets and Boat Club Road Animal Hospital.

Signature of Owner/Responsible party _____ Date _____

Checked-in by staff member (initials) _____

Revised 07/13