

KENNEL NUMBER

BOARDING FORM

BOX NUMBER.

Reference Number.....

1 Form Per Dog**Appointment times only****OWNERS DETAILS.****8.15-10.00. - 15.00-17.00.****8.15-10.00. - 15.00-17.00.**

DATE AND TIME ARRIVED		DATE AND TIME DEPART	
OWNERS NAME			
ADDRESS			
EMAIL			
PHONE NUMBER		MOBILE NUMBER	
EMERGENCY CONTACT NAME		PHONE NUMBER	
EMERGENCY CONTACT ADDRESS		DESTINATION OF HOLIDAY	

DOG DETAILS

PETS NAME			IF OVER 10 YEARS OLD,GO TO SENIOR DOGS.
BREED		AGE	AGE
SEX OF DOG		COLOUR	
NEUTERED (MALE)	YES / NO	SPAYED (FEMALE)	YES / NO
DATE OF LAST VACCINE		KENNEL COUGH	YES / NO
DATE OF LAST FLEA TREATMENT		DATE OF LAST WORMING	
VETS NAME AND ADDRESS			
INSURANCE DETAILS	Name of insurer & policy No If no insurance please write NO INSURANCE		
MICROCHIP NUMBER			
YOUR DOGS FOOD & FEEDING ROUTINE,			
ANY DIETARY REQUIREMENTS			
IS YOUR DOG IN SEASON	YES / NO	HOW MANY DAYS IN SEASON	
DATE OF LAST SEASON		HAS YOUR DOG HAD PUPS	YES / NO

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ANY MEDICAL CONDITIONS	YES / NO	VISITED A VETS IN THE LAST 12 MONTHS	YES / NO
IF YES, PLEASE STATE			
MEDICATION PLEASE STATE			
IS YOUR DOG AGGRESSIVE TO PEOPLE	YES / NO	IS YOUR DOG AGGRESSIVE TO OTHER DOGS	YES / NO
2+DOGS BOARDED ARE THEY SHARING ?	YES / NO	IS YOUR DOG DESTRUCTIVE	YES / NO
ANY ALLERGIES PLEASE STATE	YES / NO IF YES -		
ANY SENSITIVE AREAS ON HIS / HER BODY	YES / NO IF YES -		
ANY LIKES AND DISLIKES	YES / NO IF YES -		
IS YOUR DOG IN GOOD HEALTH TO BOARD, WALK, EXERCISE	YES / NO	STATE OTHER	
ANYTHING ELSE WE NEED TO KNOW ABOUT YOUR PET	YES / NO IF YES -		
ITEMS LEFT FOR BOARDING	YES / NO IF YES -		

HAVE YOU NOTICED ANY UNUSUAL BEHAVIOUR WHILST IN SEASON OR ANY OTHER TIME

PLEASE STATE:-

ADDITIONAL SERVICES

FOREST WALK (£20 PER WALK per dog)	YES	NO	HOW MANY TIMES A WEEK.	TOTAL WALKS
BUDDY TIME (FREE)	YES	NO	AGGRESSIVE PLAYING WITH DOGS	YES / NO
BATH & DRY FROM	YES	NO		
FREE TREATS DAILY	YES	NO		

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Any pets boarding during times of firework displays must inform us if they get frightened or nervous. While we take every care to minimise loud noises we cannot be held liable for any undue stress or injury

All Dogs boarding with us must be friendly and sociable.
No aggressive or unsociable dogs

Payment must be paid the day before arrival online on our website
or cash on the day of arrival
All T&C's are on our website

PRICES TO INCLUDE DAY OF ARRIVAL AND DAY OF DEPARTURE
Day of departure half price before 10.00AM, Full price thereafter.

I HAVE READ AND UNDERSTOOD AND AGREE TO ALL TERMS AND CONDITIONS OF BOARDING, SERVICES AND THE INFORMATION I HAVE PROVIDED IS TRUE.

I hereby indemnify PINE LODGE KENNELS Services and their staff against liability of any kind whatsoever arising from my dog's participation in any services offered by PINE LODGE KENNELS

Please Sign And Date.

Signed.....Print.....Date.....

OFFICE USE ONLY

DATE ARRIVED TIME DEPARTURE TIME..... NO OF DAYS.....

NO OF WALKS..... TOTAL PRICE OF WALKS £..... DOG BATH £..... WELCOME PACK £.....

DEPOSIT PAID £..... TOTAL PRICE £.....

TOTAL TO BE PAID AFTER DEPOSIT £.....

SENIOR DOGS OVER 10 YEARS OLD ARE BOARDED AT owner's own risk**All food for senior dogs must be provided by owner.**

I Give permission for Pine Lodge Kennels to act on my behalf regarding the HEALTH and WELLBEING of my dog whilst in their care. Should any attempt to contact relatives fail in an emergency situation, I give my permission for Pine Lodge Kennels to seek the appropriate action whatever the outcome may be.

Any vet costs incurred will be payable by myself

Vets Name

Vets Address.....

Phone Number.

VISION LOSS / EYE PROBLEMS	YES	NO	LUMPS / BUMPS / SKIN PROBLEMS	YES	NO
INCREASED / STRAINED URINATION	YES	NO	GAINING WEIGHT	YES	NO
BAD BREATH / GUMS / ORAL PROBLEMS	YES	NO	LOSING WEIGHT	YES	NO
DIFFICULTY MOVING	YES	NO	BEHAVIOR PROBLEMS / CHANGES	YES	NO
MEMORY PROBLEMS / DEMENTIA	YES	NO	JOINT PAIN / STIFFNESS	YES	NO
LOSS OF SENSES	YES	NO	INCONTINENCE	YES	NO
DIFFICULTY PLAYING / GETTING AROUND	YES	NO	GENERALLY LETHARGIC	YES	NO
VOMITING / DIARRHOEA	YES	NO	DRINK A LOT OF WATER	YES	NO
DOES NOT EAT PROPERLY	YES	NO	NEED MORE HEAT	YES	NO
BLOOD IN STOOL	YES	NO	BLOOD IN URINE	YES	NO

THE RETURN HOME

I HAVE READ AND UNDERSTOOD AND AGREE TO ALL TERMS AND CONDITIONS OF BOARDING.

I hereby indemnify Pine Lodge Kennels Services and their staff against liability of any kind whatsoever arising from my dogs participation in any services offered by Pine Lodge Kennels

I AM HAPPY MY DOG/S HAVE BEEN RETURNED IN GOOD HEALTH

SIGNED _____

SIGNED ON BEHALF OFF _____

DATE _____

Medication Protocol

There are now strict rules we must follow if we are administering any tablets/ medication to your dog. We have paperwork to complete each time we do this and must monitor the animal to check for any adverse reaction.

We must know the condition the animal is being treated for and we also must see the original packaging/container the medication came in. This is done so that we can check the vet details and satisfy ourselves on dosage.

If your pet is on ANY form of medication, you need to tell us at the time of booking

We will need to feel comfortable that we can administer the medication without causing undue stress to the animal or any risk to kennel staff. We may decline the booking if not.

Please note we are only able to administer medication between the hours of 7.00am - 18.30pm

Medication Form - Complete 1 form per prescribed item please

Any vet visits made by Pine lodge to transport your pet will incur a £30 transport fee for each visit (ie drop off and collection). If a waiting time is required at the vet visit then a £20 fee per hour will be charged.

An administration fee for medications given will incur a charge of 50p each day.

Emergency contact name _____

Emergency contact address _____

Emergency contact number _____

Owners Name _____

Owners Address _____

Name of Pet: _____

Name of vets: _____

Treatment for? _____

Name of medication: _____

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Form of medication (Liquid/Tablet/Other) Dose & Frequency: _____

How to be administered: _____

Date medications is to start and stop if applicable: _____

Anything to help administration (this must be provided) _____

All medication must be brought in a container with a closed lid and clearly marked with pets name and name of meds

I give Consent for pine lodge to administer medication to my pet

Signed. _____

Print _____

Date _____