

# Pet Medical Center Pasco Boarding

## Canine Check-In Sheet

Owner: \_\_\_\_\_

Pet(s): \_\_\_\_\_

Drop-off Date: \_\_\_\_\_

Pick-up Date: \_\_\_\_\_ **Pick up/Drop off**

Drop-off Time: \_\_\_\_\_

Pick-up Time: \_\_\_\_\_ **Hours:** *Holiday hours may vary*

Mon-Fri: 9 am – 4:30 pm

Sat: 9am-2pm or 6pm-7pm

Sun: 6-7pm

### Feeding Instructions for Your Pet

**Brand of food and Flavor:** (Dry) \_\_\_\_\_  
(Canned/Raw) \_\_\_\_\_

**(All food and treats must be provided by owner. We do have a refrigerator/freezer available for pet food storage)**

**Amount to Feed:**(We do not offer the option of free fed during boarding stays)

Morning \_\_\_\_\_ Cups Evening \_\_\_\_\_ Cups When did your pet last eat? \_\_\_\_\_

Additional feeding instructions: \_\_\_\_\_

*(example: Mix wet food with a 1/4 cup dry in PM)*

**Is your pet on any medications or supplements?** No  Yes

*(Download or Ask for medication/supplement form, a **fee of \$5 per day** will be charged for all medications/supplements)*

### Additional Information about Your Pet

**Any known allergies or sensitivities?** Yes  No

If yes, please describe: \_\_\_\_\_

**Any specific instructions related to handling your pet?**

\_\_\_\_\_

\_\_\_\_\_

*(i.e. food or toy possessive, fear of men/women, potty or feeding habits, anything else we should know, etc.)*

**Please list all articles you brought for your pet (toys, towels, collar, leash, etc.):** **We recommend you bring anything that will help your pet feel more comfortable while staying with us. Appropriate toys (non-stuffed) and bedding can be available to dogs at all times.**

\_\_\_\_\_

\_\_\_\_\_

## Pet Care Rates & Discounted Packages

### Boarding Only Clients:

- Basic:** Price is per dog per night: 2 x daily feeding, a minimum of 4 potty walks daily, and a single photo update via email
  - **Small Kennel \$ 25 a night (dogs 15lbs or less)**
  - **Medium Kennel \$30 a night (dogs 25lbs or less)**
  - **Large Kennel \$35 a night (dogs 45lbs or less)**
  - **Dog Run \$40 a night**
- 15-minute play sessions: \$15 each** (non-daycare participants) **Please indicate how many for each day: \_\_\_\_\_**
  - **Up to 3 days = 1 x 15 mins during stay (Recommended)**
  - **Up to 5 days = 2 x 15 mins during stay (Required)**
  - **More than 5 days = at least 1 x 15 min every other day during length of stay (Required)**
- Enrichment:**
  - **Stuffed Kong \$7:** We can provide a stuffed kong to help keep your pet occupied while they are in boarding.
  - **Enhanced Play Sessions \$45 for 30 minutes:** We can work on training, enrichment, to help work with your pet in a way that will engage both their mind and body. Please speak with a team member for more details.

**Daycare Participants:**

- 1. **Social Dog:** Basic, half day in daycare, 1 x 15 min play sessions Sundays and Holidays
- 2. **Active Dog:** Basic, full day in daycare, 2 x 15 mins play sessions Sundays and Holidays
- 3. **Pampered Pooch:** Basic, full day in daycare 2 x 15 min play sessions Sundays and Holidays, Spa Package

**Extras: Please indicate which option you would like to add.**

- 1. **Spa Package (Priced is based on breed and coat type):** bath, blow dry, pedicure
  - \$30/\$40/\$50
- 2. **Pedicure: \$20,** nail trim and dremmel
- 3. **Medication Administration: \$5 flat rate for any medications or supplements given per day**
- 4. **Additional Photo Update: \$5 for additional photos (the first photo is included in the cost of your boarding stay for 3 or more days booked)**

Are there any pre-existing conditions or injuries we should be aware of? **YES**    **NO**

If so please list them:

\_\_\_\_\_

**In the event that a medical issue arises while my pet is in the care of Paws to Play Dog Daycare & Boarding, I authorize the Doctors and staff at Pet Medical Center to:**

**(Please select one)**

- Perform whatever treatment the Doctor deems necessary up to \$ \_\_\_\_\_. Do not call first for authorization. I understand that I will be responsible for the full total of the invoice when I pick up my pet.
- My Pet has a Prevent Plan through Pet Medical Center of Pasco.
- Contact me first with an estimated cost, if I am not able to be reached by phone please contact my emergency contact list below, they have my permission to authorize or decline treatment.\*\*\*

\*\*\*If owner or emergency contact is not able to be reached within a reasonable amount of time, the Pet Medical Center staff will provide minimal treatment to care for your pet in order to keep that pet as comfortable and healthy as possible.\*\*\*

**Owner Phone Number and email address (where you can be reached):** \_\_\_\_\_

**Two Emergency Contacts (someone other than you): Please make sure one person is local and available to pick up your pet in case of emergency.**

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

I confirm that my pet's vaccinations are current and my pet has received an exam with a licensed veterinarian in the past year. I understand that these health requirements are required in order to board my pet at Paws to Play. I also agree that if my pet has a chronic ongoing (current or previous) medical concern that requires medication/treatment, then my pets' treatment will be managed by Pet Medical Center of Pasco doctors in order to ensure the safety and comfort of my pet. Furthermore, I understand that if I fail to pick up my pet within five days from the agreed upon pick up date then the animal is considered abandoned unless other arrangements have been made. At such time, I relinquish all claims to my animal and Pet Medical Center will assume ownership and all rights there unto afforded. I understand that this does not relieve me of the responsibility of payment of accumulated hospital and boarding charges. **If the pet is released after hours there will be a \$50.00 charge.**

\_\_\_\_\_  
Signature of Owner or Agent

\_\_\_\_\_  
Date