

KENNEL NUMBER

BOARDING FORM

BOX NUMBER.

Reference Number.....

1 Form Per Dog**OWNERS DETAILS.**

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

DOG DETAILS

PETS NAME			IF OVER 8 YEARS OLD,GO TO SENIOR DOGS.
BREED		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

KENNEL NUMBER

BOARDING FORM

BOX NUMBER.

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 (£15 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 (£15)	YES	NO	TIME OF DEPARTURE	
WELCOME PACK £ 6	YES	NO		

KENNEL NUMBER

BOARDING FORM

BOX NUMBER.

Payment must be made before the return of your dog, if no payment is made at this time any other costs incurred by us (i.e solicitors fees) to recover the monies owed will be passed on to you the customer on top of the original fees.

PRICES TO INCLUDE DAY OF ARRIVAL AND DAY OF DEPARTURE
Day of departure half price before 11.00AM, 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 CHRISVALE KENNELS Services and their staff against liability of any kind whatsoever arising from my dog's participation in any services offered by CHRISVALE 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 8 YEARS AND OVER

I Give permission for Chrisvale 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 Chrisvale 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

THERMOSTAT HEATED PET PAD GENTLY BRINGS BODY MASS TEMPERATURE UP TO AROUND 39C CAN BE OBTAINED FOR £1.50 a day

I WOULD LIKE TO BOOK A HEATED PET PAD AT £1.50 a day please. YES / NO

TERMS AND CONDITIONS APPLY.

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