

HOLLY RIDGE MANOR CANINE COUNTRY CLUB CHECK-IN SHEET

1st OWNERS NAME _____ 2nd OWNERS NAME _____

1st PHONE:(h) _____ (c) _____

2nd PHONE:(h) _____ (c) _____

Arrival Date: _____ Departure Date: _____

Emergency Contact Name: _____ Phone: _____

PET NAME: _____ Is your pet spayed or neutered? _____

Amount Per feeding: AM _____ NOON _____ PM _____

PET NAME: _____ Is your pet spayed or neutered? _____

Amount Per feeding: AM _____ NOON _____ PM _____

IF FOR ANY REASON YOUR DOG RUNS OUT OF FOOD HERE, WOULD YOU LIKE US TO FEED THEM HOUSE FOOD?
(GRAIN FREE FOOD BRAND) \$3 /PER FEEDING CHARGE YES or NO

EXTRA SERVICES:

Bath: (boarding charges apply if afternoon)

Pick up time (for BATH only): _____

Extra Play Time \$5.00/DAY

DAYS GIVEN _____

Extra Pool Time (seasonal) \$5.00/DAY

DAYS GIVEN _____

Hand Walk \$5.00/DAY

DAYS GIVEN _____

HOME COOKED MEALS

Pupsicle (Frozen Chicken Broth- salt free) \$2.00 each **DAYS GIVEN** _____

Chicken and Rice (1 cup servings) \$5.00 per cup **DAYS GIVEN** _____

Peanut Butter Sandwich \$3.00 Each **DAYS GIVEN** _____

PLEASE LIST ALL ITEMS BROUGHT INTO MOTEL (NO LEASHES, CRATES OR BOWLS PLEASE).

***** If your dog is on medication(s), then please fill out the medication form.. *****

IS YOUR DOG SENSITIVE TO PEBBLED YARDS?	YES	NO
CAN YOUR DOG WALK UP AND DOWN STAIRS?	YES	NO
MY DOG IS ALLOWED TO SWIM	YES	NO
IS YOUR DOG ALLOWED BEDDING?	YES	NO
CAN YOUR DOG JUMP A 6' FENCE?	YES	NO

Name of Vet Practice (if changed): _____

Please Initial (after reading):

- _____ I ALLOW MY DOG TO SOCIAL PLAY AND UNDERSTAND ALL OF THE RISKS INVOLVED.
- _____ I UNDERSTAND THAT DOGS CHECKED OUT AFTER **NOON (12 PM)** WILL BE CHARGED FOR THAT DAY. IF YOU DO A LATE PICK UP YOU ARE STILL CHARGED FOR THE DAY **AND** THE \$15 LATE PICK UP FEE.
- _____ I UNDERSTAND THAT HRM IS NOT RESPONSIBLE FOR LOST OR DESTROYED ITEMS.
- _____ I HAVE READ AND UNDERSTAND HRM'S POSTED POLICIES ON EMERGENCY TREATMENT, PAYMENT POLICY, RETURN CHECK FEES, SOCIALIZATION RISKS AND ABANDONED PETS.

VET RELEASE FORM

Although the staff at Holly Ridge Manor closely monitors your pet, sometimes active play and rough housing pose the possibility of injury. Additionally, certain illnesses and infections can be transmitted during boarding. Animals identified as being infectious will be isolated to the extent possible. Common injuries associated with boarding include, but are not limited to, bruises, lameness, abrasions, punctures, intestinal ailments (vomiting or diarrhea), coughing and skin irritations. These problems usually resolve with appropriate treatment.

If your pet develops any health problems, HRM will pursue treatment with one of the following: your veterinarian, Healing with Heart Veterinary Care, or an emergency treatment facility. Treatment may include, but is not limited to, injections, medication, and diagnostic testing. HRM will pay for the treatment when veterinary services are rendered, but **the owner/responsible party is responsible for reimbursement at time of pick up.**

The staff at HRM will make reasonable effort to contact the owner and/or emergency contacts should medical treatment be needed.

Does your pet have any pre-existing conditions? Ex: Food Allergies or Allergies

I, the undersigned, so hereby certify that I am the owner (or duly authorized agent for the owner) of the animal aforementioned and authorize the doctors and staff at Healing with Heart Veterinary Care or any other veterinary facility full and complete authority to provide medical care to promote the good health of my pet(s). This information and Vet Release Form covers all every and all stays at Holly Ridge Manor.

OWNER S SIGNATURE _____ DATE _____

Daycare Clients (Current Daycare Clients Only)

Please circle the days you would like and alert daycare,

Monday Tuesday Wednesday Thursday Friday Full _____ or Half _____

Drop off date at daycare: _____ Home From Daycare Date _____

Medication Form

Dogs Name: _____

Med. Name: _____ DOSE: _____ CONDITION: _____ AM Noon PM

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