PAWS & CLAWS BOARDING CHECK-IN SHEET

Pet names:	Owner name:		
Pick up date: Emergency contact #:			
We have a 12pm ch	eck-out time! Ther	e is a \$24 late check-out fee per pet Mon – Fri	
Sunday pick up time		& 3:30-5:30pm. There is a \$18 late check-out fee afternoon pick up	
	FEEDING	INFORMATION	
Frequency	Amount per serving	*If you have multiple pets, do they need to be fed separately? YES or NO	
AM		*Does your pet have any allergies?	
NOON (\$2.50 charge)		*If your pet is not eating well, can we add	
PM		cheese, pumpkin, broth to their food? YES or NO	
1 101		TES OF INO	
If your pet is STILL no	ot eating, can we a	dd Purina Pro Plan EN wet food (\$5)? YES or NO	
	MEI	DICATIONS	
Please note that vitamin	ns, supplements, cre	eams, powders, drops will be treated as medication	
<u>Frequency</u>		Medication name & Dosage	
АМ		Pet: Dose:	
NOON		Pet: Dose:	
PM		Pet: Med: Dose:	
	PLAY, BEI	DDING, & TREATS	
*Can your do	og interact with oth	er dogs at Paws & Claws? YES or NO	
*Can your		d/or blanket at night? Free of charge Blanket OK NONE	

*If you brought treats for your pet, how many & what type do they get daily? _____

(There is a \$25 charge if your pet tears up a bed, and it has to be replaced.)