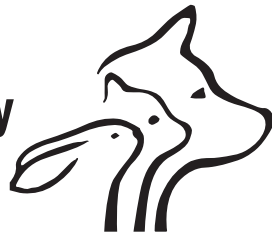


Sit 'n' Stay



Petminding

## Home Boarding Booking Form

### BOOKING DATES

Date in: ..... Time: .....

Date out: ..... Time: .....

### PET DETAILS

Name of pet: .....

Breed: .....

Age: ..... Colour: ..... Sex: .....

Neutered: YES / NO

### BEHAVIOURAL ISSUES

Anxieties\*: .....

Any known issues with:

Children under 6 years of age: YES / NO

Cats or other pets: YES / NO

Social behaviour towards other dogs: YES / NO

Is a muzzle required?: YES / NO

\* ie. fireworks, thunderstorms, loud noises etc.

### HOUSING & FEEDING ARRANGEMENTS

Sleeping arrangements (own basket / duvet, crate etc):  
.....

Preferred exercise: .....

Recall commands: .....

#### FEEDING

When supplying your own food, please ensure you provide sufficient for the duration of your dog(s) stay.

Type of feed: .....

Amount: .....

Feeding time(s): .....

Any special dietary requirements: .....

Allergies (chemicals, pollen, food etc): .....

### OWNER DETAILS

Name: .....

Address: .....  
.....  
.....

Home phone no: .....

Mobile: .....

Email: .....

Emergency contact name(s): .....

Emergency contact no(s): .....

### VET DETAILS

Name of vet: .....

Address: .....  
.....  
.....

Phone no: .....

Microchip number/tattoo: .....

Any illness or operation in last 6 months: YES / NO

If YES give details: .....

Date of last flea treatment: .....

Type of flea treatment given: .....

Date of last worming: .....

Type of wormer given: .....

On medication: YES / NO If YES please complete separate medical record form.

## PERMISSIONS

I, \_\_\_\_\_, being the owner of the dog(s) named \_\_\_\_\_  
\_\_\_\_\_ as detailed overleaf, hereby give the following permissions:

For my dog to socialise with other boarders under supervision (but to eat and sleep separately):	YES / NO
For my dog to be let out into the garden supervised / unsupervised:	YES / NO
For my dog to be taken out of the house on a lead for exercise:	YES / NO
For my dog to be let off the lead out of the house under supervision:	YES / NO
For my dog to be taken in the car:	YES / NO

## VETERINARY CARE

Where dogs become unwell, Sit 'n' Stay Petminding will always seek to contact you and/or your emergency contact and to carry out any instructions as appropriate. Should this not be possible, please indicate whether you give your permission for any of the following:

For my dog to be transported to my vet if required (within 10 miles only):	YES / NO
For my dog to be transported to another vet if mine is unavailable:	YES / NO
For any urgent veterinary treatment to a maximum cost of £ _____ to be carried out on the vet's advice:	YES / NO
In extreme cases where the advice of the vet is immediate euthanasia, to carry out that treatment:	YES / NO

In this event, I would want the body of my dog: retained / cremated.

**I understand that I am liable for any veterinary costs incurred in caring for my dog.**

This form must be completed prior to, or at the time of, the initial familiarisation (meet and greet) session, and will be retained by Sit 'n' Stay Petminding in compliance with the local authority home boarding licensing agreement under which we operate.

All details on this Booking Form together with any supplementary information or documentation regarding your pet(s) will be confirmed at the familiarisation meeting.

I hereby confirm the details provided on this form are correct and that I have read, understood and accept permissions I have given in respect of the care of my dog(s) as detailed above and overleaf.

I will bring my dog's vaccination certificate (or a photocopy) on the date of familiarisation / arrival.

Please tick

Signed: \_\_\_\_\_ PRINT name: \_\_\_\_\_

Dated: \_\_\_\_\_

**Sit 'n' Stay Petminding**

Tel: 01446 713582

Mobile: 07749 660 738

Email: [sue@sit-n-stay-petminding.co.uk](mailto:sue@sit-n-stay-petminding.co.uk)

[www.sit-n-stay-petminding.co.uk](http://www.sit-n-stay-petminding.co.uk)