| Boarding | Check-In | Form |
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| Dog's Name: |
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General Information:

| • | Departure Date: Approximate Time: | | | | | | | | | |
|-------|--|------------------|-------------------|----------------|---------|-------------------|--|--|--|--|
| • | Would you li | ke any departu | re services? | □ Bath and nai | l trim | ☐ Nail trim only | | | | |
| • | • Does your dog have any <u>NEW</u> medical issues that Bark n Park needs to be aware of? | | | | | | | | | |
| | Note: If your dog requires limited play or use of a e-collar, this must be arranged with management prior. | | | | | | | | | |
| | □ Yes | \square No | If yes, please | e explain: | | | | | | |
| • | Has your dog been exposed to or diagnosed with any communicable disease in the past 30 days? | | | | | | | | | |
| | □ Yes | \square No | If yes, please | e explain: | | | | | | |
| Feedi | ng: | | | | | | | | | |
| • | What type of food will your dog be eating? | | | □ Kenn | el food | □ Owner's food | | | | |
| • | How many times per day does your dog eat? | | | | | | | | | |
| | □ 1x day AM | □ 1x day F | PM □ 2x d | ay □ 3x day | □ Other | - Please explain: | | | | |
| • | ● How much food does your dog get at each meal? Ex. ½ cup or 1 scoop or 1 bag | | | | | | | | | |
| • | Does vour do | g have food alle | ergies? \Box Ye | s □ No | | | | | | |

Medications:

• If medications are required, please list the <u>names</u>, <u>amounts</u> and <u>times</u> these medications are to be given along with the <u>method of delivery</u> for oral medications (ie. pill pocket, cheese, etc.)

Note: Injectable medications incur an additional charge and must be arranged with management prior.