



Pet Name: _____

Parent's Name: _____

Reservation Dates: _____

Overnight Stay Check-In Form

Day Camp Option (no charge) – All overnight guests may join Day Camp if they are good with other dogs.

Is your dog good with other dogs? **YES** **NO** If yes, would you like your pet to attend Day Camp during their stay with us? **YES** **NO**

Outdoor Walks

Would you like to have your dog leash-walked outside during his or her stay? **YES** **NO** **Please Note –** though a remote chance, there is obviously a risk with outdoor walks of dogs getting loose from its collar or breaking away, etc. Though we do not expect this to happen, we must remind owners of the risk. **Initial Here!**

Medication or Other Special Needs

Is your pet on medication? If so, please provide the medication to us in clearly labeled packaging stating the pet's name, name of medication, dosage, frequency and time to administer, and reason for medication.

Does your pet have any other special needs or requests?

Optional Concierge Services

Would you like to add any of the services below during your pet's stay?

Doggy-Safe Ice Cream Snack - \$2

15 minute Individual Bedtime Story and Cuddle Time - \$5

Brushing with Massage - \$15

Bubble Bath prior to going home. - \$10

Nail Trim \$15