



Bear Brook Kennel - Check-In Report

In order to help us give the best care possible, please fill out this sheet with information regarding your dog's visit with us! Please print neatly.

Client Name: _____ Pet Name: _____

Date of Arrival: _____ Date and Time of Pick up: _____

Feeding Instructions:

- Kennel food
 - Dry How much per meal? _____ When does your dog get fed?
 - Canned How much per meal? _____
- Owner's food*?
 - Dry How much per meal? _____ AM NOON PM
 - Canned How much per meal? _____

*If your food runs out, we will feed ours.

Health Concerns:

Are there any pre-existing conditions we should know about, i.e. any allergies, epilepsy, heart condition, arthritis/lameness, etc?

Are there any issues that have come up in the past 24-48 hours, i.e. vomiting, diarrhea?

Medications

Does your dog have any medications? Yes No

If we run out of the medication you have provided, can we call your vet and have it refilled through them or through Brewer Vet Clinic? Yes No

If your dog will be getting medications while boarding with us, please list them below along with the instructions for each. (Continue on back, if needed.)

Equipment Please list all equipment you've brought with your dog for this stay (Continue on back, if needed):

Playtimes (\$4/piece)? Yes No How many per day? _____

Walks (\$3/piece)? Yes No How many per day? _____

Nail Trim (\$8)? Yes No

Signature of owner: _____ Date: _____ Receptionist Initials _____