



CHECK-IN FORM - ONE FORM FOR EACH PET

Last Name: _____ Pet's Name: _____
Date Coming In: _____ Date Going Home: _____
Emergency Contact: _____

*Please list a local number in case we can't reach your cell phone or destination contact number.
Local contact might be required to pick up your pet in case of emergency weather conditions.

IMPORTANT PET INFO: Does your dog gag or cough when walking on leash? _____
Any fears? _____ Does he climb or dig? Any other issues? _____

GROOMING & BATHING: Bath only _____ Groomed like last time? Yes / No
Notes on grooming: _____

I would like to pick up my pet at (time) _____ OR call me when my pet is ready

BELONGINGS: 2 TOY LIMIT - For safety, no rope toys. Collars & leashes aren't necessary unless
someone else is picking your pet up. NO LARGE BEDS. Bedding should be light-weight enough to
easily fit in laundry if it gets soiled. Please list all belongings you will be bringing with your pet including
bedding & toys: 1. _____ 5. _____
2. _____ 6. _____
3. _____ 7. _____

FOOD & TREATS: Bring your pet's food. NO BOWLS. Any dry food in zip-lock baggies.
_____ Feed My Pet's Food (Brand) _____ Quantity (by standard 8 oz. cup)
_____ Times per day AM / NOON / PM / LV DOWN
_____ Treats (what brand?) _____ How many & how often? _____

Eating Behavior: Good / Picky / Slow / Fast / Only eats table scraps / Eats off floor, plate / Other:

MEDICATIONS

*If your pet is on medication for any contagious illness, a veterinary release is required for your pet to
board with us. Medications should be brought in original veterinary container.

Medication Name Dosage & How Often? Why is your pet on this med?
1. _____
2. _____

I understand the fee for boarding is \$35 per night, per pet. A seventh night during the stay is free.

Customer Signature: _____

OFFICE USE: RG1 RG2 WY WN FY FN

OPTIONAL

HEALTHY CARE WARRANTY

In consideration for the payment of the warranty fee, and subject to the exceptions and conditions listed here, Riverside Pet Grooming / Riverside Pet Boarding (Facilities) will pay up to \$500 for any veterinary care provided by a licensed veterinarian for the care or treatment of the boarded pet on this form for any injury of the pet or sickness incurred while the pet is boarding at any of our facilities.

Exceptions to this coverage are 1) pre-existing health conditions; 2) injury, illness or death resulting from incidents occurring before arrival; 3) injuries sustained from another family pet while boarding or playing together; and 4) gastric dilatation-volvulus (bloat).

The Owner hereby agrees to authorize his veterinarian to forward a copy of the diagnosis and treatment history to our facilities. Any and all claims under this warranty must be submitted to our facilities within ten (10) days from the pet's departure date. Such records are required before any claim is paid. Once received and verified by our facilities, payment will be sent directly to the owner for reimbursement. A signed statement by the veterinarian may be required, stating that the illness was not part of, or caused by, a pre-existing condition. Any controversy or claim relating to this certificate shall be settled by arbitration in accordance with the rules of the American Arbitration Association.

- Please enroll me on the Healthy Care Warranty for this visit at \$7.00 per pet
- I choose to not enroll on the Healthy Care Warranty at this time

I have read this agreement on this date, understood its terms and verify with my signature that I am over 18 years of age.

Owner: _____ Date: _____