

## BOARDING CHECK IN

DATE IN:

DATE GOING HOME:

EMERGENCY NUMBER:

PETS ADMITTED TO BOARD:

VACCINATIONS: Up to Date:

Needed For Pet:

### MEDICATIONS:

Heartworm & Flea Prevention:

Other Medications:

Not On Any

Brought

Brought

Put Up

Put Up

Still Needed

Type

Today

### Feeding Instructions:

Brought Own Food:

Science Diet Sensitive Stomach

Feed How Often: Free Feed

Once Daily

Twice Daily

Three Times Daily

Other Feeding Instructions:

### OTHER THINGS BROUGHT IN:

SERVICES REQUESTED WHILE BOARDING: Please circle all that apply

Bath

Check Ears

Check Skin

Dental

Surgery

Vaccinations

Other:

ANY PROBLEMS NOTED AT HOME? Please circle all that apply

None

Coughing

Sneezing

Vomiting

Gagging

Bowel Movements

Appetite

Perkiness

Scratching

Eyes

Urination

Scotting

Shaking

Ears

Other

### PHYSICAL EXAMINATION:

FLIP THE LIP: GRADE I GRADE II GRADE III GRADE IV Dental Cleaning: Yes No

FLEAS? YES NO

BATH TO GO HOME (BTGH): YES NO

TICKS? YES NO

Shampoo Requested:  
Proposed Date of Bath: