

Groomers Direct ♦ House Pet Hotel Office Notes:

555 Davis Road Albertville, AL 35951

groomersdirect.com 256-738-7297

Boarding Drop-off Form

Drop off Date _____

Pet Name _____

Owner/Agent _____

Mailing Address _____

Primary Contact # _____ Secondary Contact # _____

Email Address: _____

How did you hear about us? _____

Please note that Drop off Day is counted as first day and boarding must be paid in full based on dates above at drop-off counts. Check out is by 9 AM or it constitutes another day!

Planned pickup day and time: _____ Will this be after 9AM: Yes No

Pet Information

Name _____ Breed _____ Age _____ Sex _____

Color/Markings _____ Weight _____ Housebroken? Yes No

Spayed/Neutered? YES NO

Health History: (please include medical problems, surgeries, and physical limitations, allergies, and ailments if applicable)

Vaccination History: _____

Are there any health, medical, physical, or other restrictions that limit your dog's activity?
YES NO

If yes please describe _____

Type of heartworm preventative medication _____ Date last given: _____

Type of flea and tick control medication: _____
Date last given: _____

Security Info: Authorized to use Name on Card: _____ Billing Zip: _____

Credit Card # _____ Exp _____ Code _____

Does your pet have any medications that need to be administered during their stay?

YES NO Name of Medication _____

If yes, what are the instructions for administering the medication?

Is your animal microchipped? YES NO If yes, chip ID # _____

How would you describe your pet's personality? _____

Does your animal have any special needs or considerations? _____

What type food does your pet eat? _____

Quantity of food to be given _____

Feeding Instructions _____

Does your pet: Bite Jump Climb

Pet's Veterinarian Information

Name _____ Phone # _____

Address _____

Insurance Information

Company _____ Policy# _____

Plan Coverage _____

**if covered under insurance provide an insurance claim form to Groomers Direct*

Emergency Contacts other than owners:

Name _____ Email _____

Phone # _____

Address _____

Name _____ Email _____

Phone # _____

Address _____