

Overnight Pet Check-In



Check-In	Date: _____	Time: _____
Check-Out	Date: _____	Time: _____

Owner: _____
Phone: _____
My Destination: _____
Person Authorized to Pick Up: _____
Phone: _____

Pets: _____

PET INFORMATION

- My pet will eat the House Cuisine at no additional charge.
- I have supplied my pet's food (separate baggies for each feeding). Name of food: _____
- In the event my pet decides to be a finicky eater is it okay to use some enticement measures? Yes No

Pet Name: _____	Separate while feeding if sharing suite with family?	<input type="radio"/> Yes <input type="radio"/> No
Morning Feed: _____	cups/baggies mixed with:	_____
Evening Feed: _____	cups/baggies mixed with:	_____
Notes: _____		
<hr/>		
Pet Name: _____	Separate while feeding if sharing suite with family?	<input type="radio"/> Yes <input type="radio"/> No
Morning Feed: _____	cups/baggies mixed with:	_____
Evening Feed: _____	cups/baggies mixed with:	_____
Notes: _____		
<hr/>		
Pet Name: _____	Separate while feeding if sharing suite with family?	<input type="radio"/> Yes <input type="radio"/> No
Morning Feed: _____	cups/baggies mixed with:	_____
Evening Feed: _____	cups/baggies mixed with:	_____
Notes: _____		

MEDICAL INFORMATION

- Does your pet have any old or current injuries/health concerns that require special attention? Yes No
- If yes, please explain: _____
- Does your pet have any allergies to medications and/or food? Yes No
- If yes, please explain: _____
- Additional medical information: _____

MEDICATION INSTRUCTIONS (\$1.50 per dosage)

Medication	Dosage	Time	Reason
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

Overnight Pet Check-In



PET SERVICES

Service	Quantity Insert Number:	Frequency Circle One
Initial Selection(s):		
_____ Day Camp (for boarders) - \$22 (Evaluation required)	_____	once/daily/dates _____
_____ Additional Potty Breaks - \$6	_____	once/daily/dates _____
_____ Hair/Coat Brushing - \$10	_____	once/daily/dates _____
_____ 20-Minute Personal Playtime - \$17	_____	once/daily/dates _____
_____ 20-Minute Family Playtime - \$19 (up to three dogs in same suite)	_____	once/daily/dates _____
_____ Bedtime Bisquit - \$3.50	_____	once/daily/dates _____
_____ Bedtime Story, Tuck In & Tummy Rub - \$9	_____	once/daily/dates _____
_____ Busy Bone - \$6 (Frozen Peanut Butter Kong)	_____	once/daily/dates _____
_____ Chew Bone Toy Rental - \$6	_____	once/daily/dates _____
_____ Ice Cream (Frosty Paws) - \$6	_____	once/daily/dates _____
_____ Pee Pee Pads - \$.75 each	_____	once/daily/dates _____
_____ Pool time w/ Personal Lifeguard - \$45	_____	once/daily/dates _____
_____ Stuffed Toy - \$7.50	_____	once/daily/dates _____
_____ Play Package - \$32 (Daily service includes mealtimes, 5 potty walks, 2 playtimes & chewbone toy rental)	_____	once/daily/dates _____
_____ Tranquil Kitty - \$20 (Mouse toy, cat nip & scratching post)	_____	once/daily/dates _____
_____ Kitty Cuddle - \$15 (20 Minutes)	_____	once/daily/dates _____

DAY SPA SERVICES _____ YES! Please schedule my pet for a

_____ **Spa Bath:** Massaging, cleansing bathing process along with a luxurious towel wrap, blow dry and brushing. Includes nail clipping, ear cleansing and eye attention.

_____ **Spa Groom:** A Spa Bath followed by hand scissoring per breed-specific standards (and/or to owner specifications) with a Barkley salon professional.

POLICY REMINDERS Please initial on each line.

_____ **CHECK OUT TIME IS BY 12 NOON** - Pets not picked up by 12 pm will be charged a \$25 late check-out fee, unless scheduled for a Grooming or Day Camp Service. Pets not picked up prior to closing will be considered overnight guests and charged an additional night's stay.

_____ I understand that pets cannot be admitted or released when lobby is closed. **NO EXCEPTIONS!**

_____ The lobby is closed for check-in and check-out on New Year's Day, Memorial Day, Easter, Independence Day, Labor Day, Thanksgiving Day and Christmas Day.

_____ My pet is in good health and has not been exposed to any contagious or communicable illnesses within the past 30 days. Owner acknowledges that no amount of vaccination requirement, sanitation or personalized care can prevent pets from contracting an airborne virus or communicable disease. Owner understands that he/she is responsible for all veterinary costs associated with the contraction of airborne viruses, communicable disease and self inflicted injuries.

_____ I, the undersigned, certify that I am the owner, or authorized agent for the owner, of the animal described herein. I authorize The Barkley Pet Hotel & Day Spa to obtain medical records (i.e. vaccinations) from my Veterinarian. VCA Westlake Village Animal Hospital

Other Veterinarian _____

I hereby represent that all information provided in this document is accurate and agree to pay prior to or at check-out for all services I have requested herein. I further agree that this stay is subject to the terms and conditions as set forth in the The Barkley Pet Hotel & Day Spa Agreement.

SIGNATURE: _____

DATE: _____

LOBBY HOURS
 Monday – Saturday 7am – 7pm
 Sunday 8am – 4pm