

Pack Leader, Plus... Pet Questionnaire

Your Name

Phone: _____

Your Pet's Name

Length of Days staying

Pick-up Time and Day

Please describe any personal items you've brought (label them):

Menu: (Circle any that apply)

1. Food from Home Name: _____

2. Canned or Dry

3. How much: dry _____

canned _____

4. When: AM _____ PM

5. Any food allergies? Y/N If yes, explain _____

6. Feed pets separately? Y/N

Medical:

Does your pet have the 3 shots we require?

Rabies (1-3yr), DHLPP or DAPP, Bordetella

Is your pet currently on any medications that we will have to administer? Y/N

If yes, explain :(Circle any that apply)

1. Oral Ear Eye Topical

2. Name Dosage Time

3. If your pet needs any veterinary services during their visit, please connect Vet info document to questionnaire.

(Fill out 1 Questionnaire per pet)

Playtime:

All stays include pack activity outside with supervision.

We reserve the right to remove pets from any activity due to weather or reactions your pet(s) may have. If in our judgment, your pet needs veterinary care your pet will be taken to your Vet or Webster Groves Hospital.

Pack Leader, Plus... will not be held liable for any accumulated veterinary bills while pet(s) is/are boarding, daycare, grooming or any injuries caused by other pets while services performed at owners request should they take action against each other.

Your pet(s) will be staying a total amount of Days of: _____.

At the daily rate of _____.

Total Owed _____.

Paid by: Check Cash

Owner's Signature

Date

Best Phone Number

*Christian Owned and Operated (636) 333-2224 2441 E. Rock Creek Rd.