



NDH Boarding Check-in

Owner`s Name(s): _____

Pet`s Name: _____

Boarding Dates: _____

Boarding Type: ☐ Traditional ☐ Daycare/Boarding

Feeding Information:

Food Brand/Type: _____ **How much:** _____ **How Often:** _____

If your dog is not eating well, can we mix in more palatable food to encourage appetite?

(Canned dog food, etc.) ☐ Yes ☐ No

Is your dog allowed treats? ☐ Yes ☐ No

Does your dog have any allergies (food, seasonal, insect, etc)? ☐ Yes ☐ No

Medications/Supplements: ☐ Yes (If yes, complete below) ☐ No

Type(s): _____ **Dosage:** _____ **Frequency:** _____

Personal Belongings:

Additional Services:

☐ **Nail Trim: \$7/ dog** ☐ **Nail Grinding: Additional \$5**

☐ **Ear Cleaning: \$5/ cleaning**

☐ **Brushing: \$1/ day**

☐ **Nature Walk: \$7/ 15 minute walk**

☐ **Bath: Pricing varies upon size of dog and coat condition (Includes brushing, nail trimming, ear cleaning)**

