Waggin' Tails Resort Check-In Form



Pet('s) Name:					
Arrival Date:	/2025,	Departure Da	ate & Est	imated Time: _	/2025
*All Sunday's include a \$25 fe	ee per pet, unles.	s a feline or voided l	by a Full-Daj	y Pass. :_	<u>:</u> <u>AM / PM</u>
*Pick-ups after 11AM M-F, in	ncludes a \$25 ch	eck-out fee per pet,	unless in gro	ooming morning of or	voided by a Full-Day Pass.
		MEDIC	ATION	IS ×	
Medication:		Dose:	Но	ow Often: AM	/ PM :
Medication:		Dose:	Но	ow Often: AM	/ PM :
Medication:		Dose:	Но	ow Often: AM	/ PM :
Pre-Existing Health Con	ndition(s):				
🔥 * <u>Have I H</u>	lad My N	1edication 1	Prior To	o Arrival?:	Y: N:
		FEED	<u>ING</u>		
I Feed My Pet (Circl	e): AM L	LUNCH PM	I Prej	pped My Own	Bags: Y: N:
How Much Per Servi	ing:				
Do I Have Allergies					
Do My Pets Eat Sepa					
/ *Have	e I Had A	Meal Prio	<u>r To Ar</u>	rival?: Y:	N:
	<u>BEDDIN</u>	IG REQU	EST &	WAIVER	
I REQUEST	NO BEDD	DING In My P	et's Suite	e During Their	Stay.
I REQUEST	WTR's BI	E DDING In M	My Pet's S	Suite During T	heir Stay.
I REQUEST	MY OWN	BEDDING I	n My Pe	t's Suite During	g Their Stay.
* I have read and agree	ed with Waggi	in' Tails Resort's	Release A	lgreement. I under	rstand that it is possible
for my pet to shred or se	oil their beda	ling or belonging	gs in a boa	rding environmen	t. Any soiled or chewed
possessions pose a haze	ard. Waggin'	Tails Resort rese	erves the ri	ight to remove any	y personal items during
	their stay	, if any soiling o	r shredding	g is noticed. *	
SIGNATURE:					
Please Note: This waive	er will need to	o be reviewed an	d signed fo	or each boarding	stay as you may change
	die	et, medications o	r habits at	thome!	
SEE BACKS	SIDE FO	R ADD-ON	S & RI	ELEASE AC	SREEMENT
		*STAFF US	SE ONLY!		
*WTR Prepped	Food B	ags, Owner Prep	ped	<u>Food</u> Bags, <u> </u>	Going Home.

*WTR Prepped _____ Med Bags, Owner Prepped ____ Med Bags, ____ Going Home.



EMERGENCY CONTACT INFORMATION (IN TOWN)

Name:	Relation:	Phone #: ()	
Name:	Relation:	Phone #: ()	
	l to contact you (the owner), your veterinarion	an on file, and any emergency contacts reg	
	DAYCA	<u>RE</u> 🏖	
Would	You Like Your Dog To Particip	pate In Daycare?: Y: N:	
	*Included in our boardin		NT (
	ve They Been Previewed At O		
	re scheduled <u>Monday through Wednesday</u> . \ Climb Gates?: Y: N:		
Call foul Dog			IN.
	□ GROOM	ING X	
- Free Complin	nentary Bath Any Stay <u>Five Nig</u> l	<u>nts Or More</u> !	
- Spaw Bath: S	tarting At \$30, Upon Breed - Se	ervice Includes: Bath, Nails, Bru	ush/Blow-Out
& Ear Cleaning. W	/eekday/Groomer Availability (Only!	
- Pawdicure: \$2	20 - Service Includes: Nails, Paw	Pad Trim/Shape & Ear Cleanin	g.
Weekday/Groome	er Availability Only!		
- A La Carte <u>N</u>	ail Trim (Only Clipping): \$13 W	eekday Availability Only!	
- A La Carte <u>N</u>	ail Grinding (Use Of Dremel): \$1	5 Weekday Availability Only!	
- A La Carte B	rush/Blow-Out: \$25 Weekday A	vailability Only!	
	Add-Ons To Their	<u>Spaw Bath</u>	
- De-Shedding	Treatment: \$40		
Please Note: Any doubl	e-coated breeds include a de-shed treatmen	at in the Spaw Bath, breed pricing!)	
- Teeth Cleanir	ng: \$15 - Service Includes: Brush	ing Of Teeth, Dental Spray & A	Dental Stick.
	SNACK T	<u>'IME</u> 😋	
	Waggin' Cup (S	35):	
	Peanut Butter Lick N	Mat (\$5):	
	Pumpkin Pie Bites	s (\$5):	
	Blueberry Pawp-Sic	les (\$5):	
Please check with	staff if allergies are present. An "x" will be	e accounted for 1 ONLY. Treats are given of	once per day!
FLIP PA	GE TO REVIEW & SIG	N RELEASE AGREEM	IENT 🔔
	*STAFF USE	ONLY!	

Treats Scheduled: Y: Initials: ____

Grooming Date Scheduled: _____ Initials: ____