



Your pet's name	Age and Breed		Arrival	Departure	
			Date:	Date:	
			Time:	Time:	
Owner Name :			Emergency Contact Name:		
Address:			Address:		
Email:			Email:		
Mobile:			Mobile:		
Veterinary Practice:			Insurance Company:		
Address:			Policy Number:		
			Feeding Regime: Type of food, portion size and		
Email:			Microchip Number:		
Phone:					
Vaccinations Confirm that your dog's vaccination, worm & tick treatments are effective for the duration of their stay. Proof of treatment must be produced.					
Vaccinated:	date & next due				
Worming treatment	date, frequency & product				
Anti- flea treatment	date, frequency & product				
Tick treatment	date, frequency & product				
Kennel Cough	date -strongly recommended				
Male <i>Entire males cannot board with in season females.</i>					
Entire Male	Yes	No	Neutered	Yes	No
Female		Not spayed: Please provide dates of last 3 seasons.			
Spayed		Date:	Date:	Date:	
Yes No		Has your dog gone into season unexpectedly? Provide details.			
Personality and Behaviour					
How does your dog generally get along with other dogs, e.g. on lead walks or off lead play.					
Is your dog possessive over food, toys, or other situations? If yes, please provide details.					
How does your dog typically react when approached by adults or children. Have they ever shown signs of fear or aggression?					
How does your dog typically respond when approached by other dogs? Have they ever shown signs of reactivity or discomfort?					
Has your dog ever shown interest in or attempted to chase livestock or farm animals?					
How does your dog usually react to loud noises? Do they seem upset or uneasy?					

Crate Use, please detail if your dog uses a crate at home and if you'd like this to continue.

Pet Health, please detail any medication, dosage and frequency of administration.

Agreements and Consents

Information required for our boarding licence.

Please indicate 'Yes' or 'No' to give consent or to indicate if the statement applies or not.

Trial Stay Consent and Group Interaction

Yes No I consent to a one- night trial stay to help my dog settle and socialise before a longer stay. I will be contactable during this time.

Yes No I consent to my dog joining a group walk on arrival to help them settle and get familiar with the other dogs before boarding.

Daily Routines, Care and Wellbeing

Yes No I consent to my dog being fed alongside dogs from other households.

Yes No I prefer for my dog to be fed separately from the other dogs.

Yes No I consent to my dog socialising with other dogs during their stay.

Yes No I consent to my dog walking off- lead in safe, supervised areas outside the home.

Yes No I prefer my dog to remain on-lead during walks outside the home.

Yes No It's fine for my dog to use any home boarding toys, beds, or bowls if needed.

Yes No I give permission for my dog to be transported in the home boarder's car (walks & transfers).

Yes No I agree to my dog using the garden alongside other dogs during their stay.

Yes No I consent to my dog sleeping in the same room or shared area with other dogs.

Yes No I'd prefer my dog to have their own space to sleep, separate from the other dogs.

Yes No If you're boarding more than 2 dogs, would you like them to sleep together in a shared area.

Yes No I give permission for images of my dog to be featured online (social media and the website).

Yes No I prefer my dog to use their crate during their stay, as it's part of their normal routine.

Veterinary Care and Treatment

Yes No I agree in the event of a suspected illness or injury; a vet may be contacted. If needed, examinations or investigations (such as blood test) may be carried out, and appropriate action taken based on the vet's advice.

Yes No In the event of your animal needing health support every effort will be made to contact me. If unavailable, the Emergency Contact will be consulted for guidance. The home boarder will do their best to keep me updated throughout.

Yes No I understand that, where possible, any treatment will be carried out by my dog's regular vet. If this is not possible, the home boarder's nominated vet may be used.

Yes No I agree to home boarder giving vet prescribed treatment.

Yes No I understand that vet consultations, tests, and treatments will be at my expense.

Yes No I agree that if my dog is found to have fleas or worms, the home boarder may contact a vet to arrange appropriate treatment, and any costs will be my responsibility.

Yes No I give consent with the understanding that every effort will be made to contact me first to discuss this situation if it arises. If in the vet's professional opinion, euthanasia is the most compassionate option on humane grounds for my dog.

I believe the information I've provided is true and accurate to the best of my knowledge.

Owner Name:

Signature:

Date:

**PLEASE FILL OUT THIS FORM & EMAIL BACK TO
INFO@WAGGINGDOGS.CO.UK**