



8302 Ball Ground Hwy, Ball Ground GA 30107
678-243-8843

Client First Name: _____ Last Name: _____

Pet(s) Name(s): _____

Drop Off Date and Time: _____ Scheduled Pick Up: _____

Items brought for stay:

If check-in or check-out times are outside of designated times and are agreed upon there will be an additional fee. Check-in prior to 8:00 A.M. will incur a fee of \$20. Check-out after 6:00 P.M. will be charged an additional night boarding fee.

If you have boarded with us before and there are no changes from your previous boarding stay, may we use that information for the current stay? Yes No If no, please complete new forms.

Dinning Information

- I have supplied my pet's food. **I understand in event that my pet's supply of personal food runs short, I will be charged \$3.00 per meal for house kibbles.**

- I have completed the Feeding Instruction Form

Medical Information

I **WILL** or **WILL NOT** be leaving medication for my pet that the staff will administer during the stay.

If you circled yes, you understand that our staff are not veterinarians and you assume all risk associated with the administration of medication/supplements. You will be required to complete the medication supplements forms.

Do your pets have any current or new injuries or health concerns that our staff should be aware of? YES NO If yes please explain



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Client Agreement

- I have completed the Boarding Agreement.
- I have provided the current vaccination documentation.
- I have completed a pet profile form.
- Check-in and check-out outside of lobby hours are by reservation only.
- My pet(s) are in good health and have not been exposed to any contagious or communicable illnesses within the past 30 days.
- I hereby represent that all information provided in this document is accurate, and I agree to pay for all services and fees herein. I further agree that my pet's boarding is subject to the terms and conditions set forth in the Boarding and Services Agreement that I have signed.

I have fully read, understood, and agree to ALL ABOUT THE PAW, LLC's policies stated herein.

Client Signature: _____ Date: _____