

ASHCROFT KENNELS, LLC.

FAMILY DOGS CHECK IN FORM

THIS FORM MUST BE COMPLETED BY ALL OWNERS REQUESTING TWO OR MORE DOGS TO BE BOARDED TOGETHER

Owner's Name: _____

Dog's Names: _____

Dates of Boarding: _____

- Can the dogs be fed together without supervision? Yes No
- Do either of the dogs show food aggression to the other? Yes No
- Will one dog eat the other dog's food?
Is this a problem? Yes No
Yes No
- Do any of the dogs need medication?
How is it to be administered? Yes No
In food As a treat Forced
- Do any of the dogs require special care? Yes No
- Other comments regarding these dogs while boarding:

Kennel will not be held responsible in the event that injury occurs due to these dogs being boarded together in the same run. If an injury requires professional attention, the kennel may engage the services of a veterinarian and the expenses thereof shall be paid by the owner.

In the event that a problem arises while boarding, the dogs will be housed in separate kennels and fees will be charged according to the rates posted.

Owner confirms that these dogs are from the same immediate family and coexist in harmony at their home.

Owner authorizes these dogs to be housed and fed together without supervision.

Owners/Guardian Signature Kennel Rep Date

- No changes since last stay _____
Initials Date
- No changes since last stay _____
Initials Date
- No changes since last stay _____
Initials Date