

Camp Four Paws, Inc. - Check in Sheet

PET NAME _____ AGE _____ M/F BREED/DESCRIPTION _____

Senior Program _____ Puppy Program _____ Training Program _____

OWNER'S LAST NAME _____

Email: _____

FOR PICTURES VISIT WWW.CAMPFOURPAWS.COM

Check-In Date: _____ Check-Out Date: _____ Check-Out Date: Mon Tues Wed Thurs Fri Sat Sun

Check-Out Time: _____ "OPEN" Hours: Hours may vary during Holidays. Closed on some holidays.

Monday thru Friday: 7:30 am - 1:00 pm & 3:00 pm - 7:00 pm

Saturday: 9:00 am - 7:00 pm

Sunday: 2:00 pm - 7:00 pm

Bathing, Individual Attention and Training

Bath, Ears and Nail Clipping	\$35-\$75.00	Agility Practice 15 minutes (per session)	\$12.99
Bath Only	\$30-\$55.00	Training Practice 15 minutes (per session)	\$12.99
Teeth Brushing	\$12.99	Leash work, Wait, Down/Stay, Polite Greetings	\$12.99
Nail Clipping	\$15.00		
Ear Cleaning	\$12.99	Specialized Individual Attention	\$12.99
Extra Brushing	\$ 8.99	30 Minute Nature Hike...and this is the real thing folks!	\$24.99
Massage (15 min)	\$12.99	Intensive Tooth Care—keep your dog's teeth in good shape	\$60.00

Daily Chews for Good Health, Good Teeth and Relaxation

Organic Potato Stuffed Kong Homemade by Troy, approved by Peaches, Duncan and Neo	Good for sensitive stomachs, made with organic chicken, potatoes, green beans and love	\$4.75
Beef Knuckle	Long lasting, great for teeth	\$6.00
Bully Stick (12 inches)	Mmmm! Mmmm Beefy! A favorite!	\$4.00
Small Beef Bone (6-8 inches)	Yummy! Good for their teeth.	\$4.00
Peanut Butter Kong	Yummy! Relaxing.	\$3.00

I brought the following items for my pet. Please give us a **DETAILED** description so that we can identify them and return them to you.

Bedding (1 washable item only) _____ Toys (oops, might not get back) _____

Medications/Delivery Schedule: _____

* We feed with standard measuring cups two times daily, we will divide your daily amount into breakfast and dinner*

Food Brand: _____ Cups per meal: _____

Phone number where I can be reached while I'm away: _____

Pet Owner Signature _____ Print Name - Clearly Please _____ Dated _____

Office Use Only: Vacs: Rabies _____ DHPP _____ Bordetella _____ Staff Initials _____

_____ If my dog does not have the Bordetella Vaccine, I understand that my dog may be at risk for Bordetella. Please always get this vaccine at least 30 days ahead of time to avoid quarantine.

