



Beacon Suites Pet Resort Application

Boarding, Daycare & Grooming
OFFICE: 336-298-4712 FAX :336-298-4713
E-mail: beacon.suites@yahoo.com

DATE: _____

CLIENT INFORMATION

Name _____ E-Mail: _____

Address: _____

Home phone: _____ Cell 1: _____ Cell 2: _____

Emergency Contact (someone local, other than yourself)

Name: _____ Phone # _____

DOG INFORMATION

Name: _____ Breed: _____ Color: _____

D.O.B. / / Weight: _____ Sex : M / F Spayed/Neutered Y / N

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VETERINARIAN OFFICE:

Can we upload photos from your pet's playtime to our Facebook or Instagram page? Yes / No

Can we use your pet's image on our website or advertising? Yes / No

FEEDING (BOARDING ONLY)

Feeding time daily: AM PM Both How much per meal: _____

Can your pet have treats other than their own? Yes / No

If your pet has digestive issues, can we give them a Proviabile DC probiotic (\$2/per capsule)? Yes / No

We recommend bringing your dog's own food to avoid digestive upset.

Due to state regulations, we can only accept kibble brought in **sealed containers or Ziplock bags**.

****HOUSE DRY FOOD is available for an additional \$3 per cup****

All medications/supplements must be in the original bottle/package (not pre-portioned or mixed with food).

Prescription medication will be given ONLY by the directions printed on the bottle label

BEHAVIOR / SOCIAL

Does your dog have any aggression or destructive behavior? (Over food, toys, blankets, other dogs, people, new situations, etc). Please list all that apply:

Has your dog ever jumped a 5ft fence or barrier? Yes / No

Would you consider your dog an "escape artist"? Yes / No

Has your dog ever climbed a 5ft fence or barrier? Yes / No

Would you like your dog to participate in group play (no extra fee)? Yes / No

Dogs must be friendly towards people to participate in any playtimes (solo/group)

Only dogs with matched temperaments, sizes & ages will be paired together for small, supervised group play

Dogs need to be spayed/neutered & at least 1 year old for group play.

Group play is NOT guaranteed

MEDICAL

Do you know of any previous serious illnesses or surgeries? Yes / No

If yes, please describe: _____

Do you know of any pre-existing medical conditions? Yes / No

If yes, please describe: _____

Are there any allergies that you are aware of (food/seasonal/environmental)? Yes / No

If yes, please describe: _____

GROOMING : If any fleas (dead or alive) are found on your dog a flea bath will be given at the owners expense. For sanitary reasons any that dog has a bathroom accident on themselves will be given a bath at the owners expense. Going home baths for an extra charge are done only upon request. Due to limited availability, we recommend pre-booking any grooming services before check-in.

Beacon Suites Pet Resort reserves the right to decline service to any client/dog for any reason at anytime

I authorize this signed contract to be valid approval for all future services, permitting Beacon Suites Pet Resort to accept telephone reservations/payments for service without additional signed contracts or written authorization.

I understand that pricing is subject to change with or without notice and that full payment is due at the end of service

Print:	Signature:	Date:
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