

# CountryAir VACATION KENNELS

5272 Old Virginia Springs Rd. Roanoke, VA 24014 540) 427-0444

EMPLOYEE USE	
# of Days _____	@ \$ _____ / Day
Boarding	
Playtime	
Bath/Nails	
Training	
Housekeeping	
Pick-up	
Drop Off	
Other	
<b>Total</b>	\$ _____

**Owner's Name:** \_\_\_\_\_ **Ph:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ **Emergency Contact # :** \_\_\_\_\_

**Veterinary Office:** \_\_\_\_\_ **Phone No.:** \_\_\_\_\_

**Date In:** \_\_\_\_\_ **Date Out:** \_\_\_\_\_ **AM / PM** (circle)

**Additional Playtime:** Y N      **Training:** Y N      **Bath:** Y N      **FULL Groom:** Y N

**1<sup>st</sup> Pet's Name:** \_\_\_\_\_ **Breed:** \_\_\_\_\_ **Color:** \_\_\_\_\_ **Approx. Weight** \_\_\_\_\_

Male / Female    Neutered/Spayed Y N      Fence Climber/Jumper: Y N    Good with Dogs: Y N

Medications/Special Care: Y N Specify: \_\_\_\_\_

**Feeding Instructions: DRY:** \_\_\_\_\_ cups \_\_\_\_\_ x's/day    and / or (circle)      **WET:** \_\_\_\_\_ (amount) \_\_\_\_\_ x's/day

**2<sup>nd</sup> Pet's Name:** \_\_\_\_\_ **Breed:** \_\_\_\_\_ **Color:** \_\_\_\_\_ **Approx. Weight** \_\_\_\_\_

Male / Female    Neutered/Spayed Y N      Fence Climber/Jumper: Y N    Good with Dogs: Y N

Medications/Special Care: Y N Specify: \_\_\_\_\_

**Feeding Instructions: DRY:** \_\_\_\_\_ cups \_\_\_\_\_ x's/day    and / or (circle)      **WET:** \_\_\_\_\_ (amount) \_\_\_\_\_ x's/day

My signature, agreeing to all guidelines pertaining to boarding my dog(s) at Country Air Vacation Kennels LLC, , is on file. I understand that this signature is valid for one year from date originally signed.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date