



CAMP JCVC

"My Home Away From Home"

My Name (Pet's): _____

My Owner's First & Last Name: _____

If I Have An Emergency, Contact #: _____

Arrival: ___/___/___ Departure: ___/___/___ Pick-up Time: _____



I need special attention and nurse's care.

Ask about "Special Needs Boarding" Additional costs apply.

I will circle the bone of my choice below:



I will eat JCVC menu



I will bring my own food

If I bring my own food it must be provided by my owner in individual ziploc bags for each feeding!

How much: _____ How often: _____

All of our guests receive a bath before going home.

I will circle my choice below that I will need. Additional charges will apply.



Clean Me Up Bath Deodorizing shampoo and towel dry.



The Works Bath Deodorizing shampoo, nail trim, ear cleaning, anal gland expression, blow dry, brush out, bandanna & perfume.



Deshedding Treatment Our deshedding treatment helps to control excessive shedding and improves overall coat quality.



Professional Grooming Works bath using specific shampoo for your pet's skin & coat condition, conditioning rinse, undercoat removal and/or haircut.



Can I get my teeth brushed while I am here? Yes _____ No _____



New

Blueberry Facial Gentle formula contains vanilla and blueberry to remove stains without irritating eyes or sensitive skin plus its soothing and smells good too.



Here at Camp we all get walked twice a day as courtesy. I would love extra playtime: group playtime and/or nature walks.

Circle how many playtimes **1 more** **2 more** **3 more**

Circle extra activities

group playtime **nature walk**

Not included in basic boarding, additional costs will apply

I need to see the veterinarian for: _____

JCVC is a flea free environment. All of our guests must be on monthly flea prevention. *If your pet is not on a veterinary approved flea prevention, we will administer a Capstar upon arrival.*

Which flea prevention does your pet use at home? _____

When was it last applied? _____

My pet is on medication. Below are instructions:

1. Medication name: _____
_____ Tablet(s) Frequency: _____

2. Medication name: _____
_____ Tablet(s) Frequency: _____

3. Medication name: _____
_____ Tablet(s) Frequency: _____

In signing below, I agree that the information stated above is accurate. The discharge date & pick up time are correct & I understand that my pet cannot be discharged on a Saturday or Sunday evening unless prior arrangements have been made. I am aware of the hours of operation here at JCVC & understand that no pet will be discharged before/after office hours. It is my responsibility to provide proof of current vaccination records at time of drop off. If my pet is due for vaccinations and/or fecal it will be performed at my expense. I agree to allow JCVC to perform any services needed should my pet become ill while boarding & understand that I will be responsible for any costs incurred. I understand that my dog is required to receive at least a "Clean-Up" bath prior to departure, at my expense. I understand that there will be daily additional charges for administering medication(s) and additional playtimes. JCVC takes great care to provide appropriate bedding, sanitized bowls and all other needs. JCVC does not allow personal items to be left with the pet. I understand that if an exception is made, to allow personal item(s), JCVC will not be held responsible for damage or loss of such. I understand that my pet will receive the best care possible while boarding at JCVC.

SIGNATURE: _____ DATE: _____