**SIT AND STAY SHEFFIELD**

**BOOKING FORM AND BOARDING AGREEMENT**

DOG’S NAME MICROCHIP NO.

BREED DATE OF ARRIVAL

AGE/DOB DATE OF DEPARTURE

MALE/FEMALE FUTURE VISIT ARRIVAL

NEUTERED/UNNEUTERED FUTURE VISIT DEPARTURE

OWNER’S CONTACT DETAILS

NAME

ADDRESS

TELEPHONE NO.

EMAIL

EMERGENCY CONTACT DETAILS

NAME

ADDRESS

TELEPHONE NO.

EMAIL

PROOF OF CURRENT VACINATIONS DATE OF BOOSTER :

FLEA WORMING TREATMENTS YES/NO

IS THE DOG INSURED? YES/NO

INSURER

POLICY NUMBER

GENERAL HEALTH

Is your dog generally fit and well? YES/NO

Please outline any medications your dog may need and when to administer. Please provide originally packaging with instructions. Please outline any medical history to be aware of.

Permission to administer medication/first aid as necessary YES/NO

Permission to administer other medication as prescribed following a vet visit during the stay

 YES/NO

Are you aware of any behavioural issues ( as referenced in our terms and conditions) that would affect or be relevant to your dog’s stay with us

 YES/NO

If you are boarding more than one dog do you consent to them being separated should any behavioural issues arise affecting the health and welfare of the dogs

 YES/NO/NOT APPLICABLE

CONTACT DETAILS OF VET

NAME

ADDRESS

TELEPHONE NO.

OUT OF HOURS TELEPHONE NO.

In a medical emergency I agree to my dog being taken to the my vet or as an alternative to the Licence holders vet being Briar Vets in Hoylandswaine

 YES/NO

In the unlikely event of a vet recommending euthanasia in the best interests of your dog do you give your consent?

 YES/NO

DAILY ROUTINE

Feeding Requirements

Please provide food and treats

Please outline any special dietary requirements (for example times of feeding, and amounts)

Do you consent to your dog being fed at the same time and in the same room as each other and the resident dogs

 YES/NO

ENRICHMENT

Details of any specific routine :

Exercise :

Play :

Grooming :

Sleep :

Enrichment activities can help your dog if he is feeling overly stressed and anxious in a new environment

Please provide treats and toys to help your dog settle

A t shirt or blanket that smells of home can sometime help your dog to relax

Bedding and blankets should be provided

EXERCISE ARRANGEMENTS

Please confirm if your dog can be exercised outside of the home environment YES/NO

If yes please provide suitable lead, collar and harness

Do you consent to your dog being housed and walked with the resident dogs? YES/NO

Our normal routine would involve walking your dog twice each day, morning and evening. Each walk would be a minimum of 20 mins

 If your dog is used to a different routine please provide details below :

DOGS WILL NOT BE EXERCISED OFF LEAD DURING THEIR STAY

TRANSPORTATION

Is your dog comfortable in the car? YES/NO

If applicable please provide an adequate car safety harness

Can your dog be driven to a safe and secure exercise area, and if so can they be let off the lead when inside?

 YES/NO

Please note this will incur an additional charge (currently £6 for 30 mins)

Do you use a crate for your dog ? YES/NO

If yes this must form part of your dog’s routine and must already be habituated to the crate.

Please note your dog will not be crated during the stay unless specifically requested and crate provided

PRIVACY POLICY

Sit and Stay Sheffield are committed to ensuring the protection of personal information collected in the conduct of it’s business. Our privacy policy is designed to inform our clients and others who deal with us about how we collect, use and disclose personal information.

Please confirm if Sit and Stay Sheffield can publish images of your dog on Social Media – Sit and Stay Sheffield Facebook page and Sit and Stay Sheffield website only

 YES/NO

EMERGENCY PROCEDURES

1. Any day to day problems that arise the Licence Holder will immediately contact the owner
2. In case of the premises becoming inhabitable the Licence Holder will contact the owner and the emergency contact to collect the dog
3. If the emergency contact cannot be located the dog will be taken to an appropriate safe place. If necessary the dog warden will be contacted and temporary alternative accommodation arranged

To ensure your dog is as comfortable as possible please add any further relevant information below

**I CONFIRM I HAVE READ AND ACCEPT SIT AND STAY SHEFFIELD’S FULL TERMS AND CONDITIONS AND ALL THE INFORMATION PROVIDED ABOVE IS CORRECT**

Signed ……………………………………………………… Dated ……………………………………………………2023