

Care Instructions

Parent's Name _____ Phone _____ Email _____

Emergency Contact Name _____ Number _____

Dog's Name _____ Age _____ Breed _____ Weight _____

Activity Level _____ (Chill, Medium, High) Potty Break Every _____ Hours Max. Alone Time _____ Hours

Feeding


You will provide ample food for your dogs stay. Quantity _____ Schedule _____ times a day.

Preferred feeding times _____ (example 7AM and 5PM)

Is your dog protective with food? _____ Treats? _____

Your Veterinarians Phone Number _____ Address _____

Medications names and dosages

 Sleeping arrangements: Does your dog sleep with you in bed, crate trained or in a dog bed? _____

How frequently would you like text and photo updates? _____

What else would you like me to know about your dog?

Parent Checklist

Enough food for your pets stay

Notify your emergency contact and what you expect of them

Leash, harness/collar

Bed, toys

Your completed Care Instructions sheet

Put my contact info in your phone