

URBAN OUT SITTERS *Boarding Sheet*

DROP-OFF DATE _____ TIME: 8-10AM 4-6PM
 (Weekend : Select Drop-Off Time)

PICK-UP DATE _____ TIME: 8-10AM 4-6PM
 (Weekend : Pick-Up Times)

1. PET(S) FIRST and LAST NAME	GENDER	BREED	FEEDINGS	KIBBLE	CAN
	<input type="checkbox"/> Male		AM Quantity		
	<input type="checkbox"/> Female		MID-DAY Quantity		
			PM Quantity		
	<input type="checkbox"/> Male		AM Quantity		
	<input type="checkbox"/> Female		MID-DAY Quantity		
			PM Quantity		
2. MEDICATIONS / ALLERGIES and instructions.					
3. BELONGINGS blanket, treats and toys (<i>Urban Out Sitters cannot guarantee items will be returned in the same condition.</i>)					
①		③		⑤	
②		④		⑥	
4. GROOMING services available for boarding clients. (<i>Please be aware dogs may get soiled within the duration of their stay at Urban Out Sitters</i>), Please specify additional services or requests.					
Departure Bath: \$25/\$35 <input type="checkbox"/> Yes <input type="checkbox"/> No					

OWNER / EMERGENCY CONTACT INFORMATION DURING STAY: Provide information on how to best contact you. Include dates if multiple locations are involved.	
--	--

PRICING: (1) Dogs leaving after 10am are charged an additional \$24/dog(s) for daycare. (2) There are no minimum days for boarding or pricing difference for weekends. (3) **\$10 surcharge on all major Holidays.**
HEALTH: (1) Every pet must be healthy and free on any contagious illnesses. Each guest must be spayed or neutered past the age of 6 months and provide proof of current vaccinations prior to boarding.
LIABILITIES: (1) I understand and agree that provided reasonable care and precautions are followed, Urban Out Sitters will not be held responsible for injuries to my dog arising from my pet(s) attendance and their participation at Urban Out Sitters daycare and release them of any liability. (2) I understand and agree that any medical emergency that develops with my dog(s) will be treated as deemed best by Urban Out Sitters staff and volunteers, at their sole discretion, and that I will assume full financial responsibility for any and all expenses involved. **REFUNDS:** (1) I understand if I choose to arrive early before my scheduled services end; I will pay for the entire service. (2) As part of my services with Urban Out Sitters, I understand no refunds or credits are given for early pick-ups and arriving home early.

Owner Signature (Please Print) _____ Phone _____ Date _____