CAYMAN PET PARADISE RESERVATION FORM

NA	ME OF PET
DC	G BREED OR SIZE CAT BREED OR SIZE
M	LE FEMALE AGE
OV	NER'S NAMEEMAIL:
НС	ME ADDRESS
PO	TAL ADDRESS
TE	EPHONE NUMBER(S)
ВС	ARDING FROMTO
W]	L COLLECT AM (BEFORE 10:30 AM) OR PM (BEFORE 5:30 PM
VE	"S NAME OR PRACTICE
HE	ARTGUARD
FL	A AND/OR TICK MEDICATION - DATE:
VA	CCINATIONS/ANNUAL – DATE:BORDETELLA – DATE:
SPECIAL DIET OR OTHER USEFUL INFORMATION	
	T BATH (DOGS ONLY) NAIL TRIM / FULL GROOM (DOGS ONLY)
	CONDITIONS OF ACCEPTANCE
1.	All pets must be treated for fleas and ticks prior to entering the kennels. If a pet <u>has not</u> been treated, Frontline Top Spot will be applied before entering the kennel at an additional cost of CI \$10 per administration plus Frontline.
2.	All boarders must be vaccinated (proof of current vaccination records may be requested). Now mandatory to have Kennel Cough Vaccine at least 3 days prior to boarding.
3.	Although every possible care will be given, all pets are boarded entirely at the owner's risk
4.	A Veterinary surgeon will be called if necessary, the account to be paid by the owner.
5.	All rates are levied daily from and including the day of arrival and departure, unless the pet is collected before 10:30 am when no charge will be made for that day.
6.	An additional charge of CI \$6.00 per day will be levied for administering daily medications.
7.	Normal hours of operation are as follows: Monday-Friday 7:00 a.m. to 5.30 p.m. Saturdays 7:00 a.m. to 12:00 Noon. Closed Sundays and Public Holidays to the Public.
8.	All charges must be paid before the pet leaves the kennels CASH / CHEQUE ONLY
SIC	NATURE DATE