## **CAYMAN PET PARADISE RESERVATION FORM**

NAMI	E OF PET			
DOG BREED OR SIZE CAT BREED OR SIZE				
MALI	E	FEMALE	AGE	SPAY/NEUTERED_
OWN	ER'S NAME		EMAIL:	
HOME ADDRESS				
POSTAL ADDRESS				
TELEPHONE NUMBER(S)				
BOAR	RDING FROM		то	
WILL COLLECT		AM (BEFO	ORE 10:30 AM) OR	PM (BEFORE 5:30 PM)
VET'S NAME OR PRACTICE				
HEAR	RTGUARD			
FLEA AND/OR TICK MEDICATION - DATE:				
VACCINATIONS/ANNUAL – DATE:BORDETELLA – DATE:				
SPECIAL DIET OR OTHER USEFUL INFORMATION				
EMERGENCY CONTACT FOR HURRICANE SEASON Micro chipped – Y/N				
	DATH (DOGG ONLY)	NAME OF THE OWNER O	DA ARVIA GRACOM (ROCC)	
EXIT BATH (DOGS ONLY) NAIL TRIM / FULL GROOM (DOGS ONLY)				
			TIONS OF ACCEPTANCE CAREFULLY AND CHEC	CK OFF
	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.			
	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.			
o A	Although every possible care will be given, all pets are boarded entirely at the owner's risk			
0 A	A Veterinary surgeon will be called if necessary, the account to be paid by the owner.			
	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 (with the exception of Sundays and Public Holidays which are charged at a full day's rate).			
o A	An additional charge of CI \$6.00 per day will be levied for administering daily medications.			
	Normal hours of operation are as follows: Monday-Friday 7:00 a.m. to 5.30 p.m. Saturdays 7:00 a.m. to 9:00am. Closed Sundays and Public Holidays to the Public.			
All charges must be paid before the pet leaves the kennels CASH / CHEQUE ONLY				
SIGN	ATURE		Da	ATE