



4675 E. Flamingo Rd  
Las Vegas, NV 89121  
(702) 458-8808 Fax (702) 458-8796

## DAY CARE QUESTIONNAIRE

(To be filled out prior to daycare)

Owner \_\_\_\_\_ Pet(s) Name \_\_\_\_\_

Phone # \_\_\_\_\_ Emergency # \_\_\_\_\_

**\*\*Though we are open seven days a week we are not a 24 hour care facility. There is a period of time overnight that your pet will be unattended if you should not be able to pick up your pet by closing.\*\***

Will there be anyone other than yourself picking your pet(s) up today?  Yes  No

If so whom? \_\_\_\_\_

We will not release ANY pet to anyone other than you without your written consent.

Are there any medications to be given while here?  Yes  No

Will your pet(s) need to be fed while here today?  Yes  No  
(We feed IAMS Eukanuba Low Residue Only).

Would you like to have your pet(s) nails trimmed?  Yes  No

Would you like to have your pet(s) Anal Glands done today ?  
 Yes  No

Would you like to have your pet(s) to have a bath today?  
 Yes  No

(This is a bath and toe nail trim ONLY. We do not offer Grooming).

### AUTHORIZATION

(Please read all statements Carefully before signing)

I understand my Pet(s) MUST be current on all Vaccines for Day Care. If they have been given elsewhere, legal proof of these vaccines must be presented at time of my pet(s) admittance. The above services are in addition to the cost of Day Care. Day Care is not an overnight stay.

If your pet needs to be seen for any other services or treatment other than what is listed above, it will be considered a Day Admit. You will be charged a Day Admit fee along with a physical exam. Additional services (such as Medication, X-Rays, Vaccines, Bloodwork, etc) are NOT included in the above fee. Please fill out a Day Admit Form.

I hereby authorize the above marked services.

I also understand that ALL charges are due and payable at the time of release.

Signature of owner/agent \_\_\_\_\_ Date \_\_\_\_\_