

THE OAKS BOARDING KENNELS

Graveoak, East Lancashire Road, Leigh, WN7 3SE. Telephone: 01942 671215 www.leighdogsandcatshome.co.uk

OFFICIAL APPLICATION FORM

OWNERS NAME: _____

ADDRESS: _____

TELEPHONE No. _____

NAME TELEPHONE No. OF CONTACT WHILST ON HOLIDAY _____

PERIOD OF BOOKING

FROM (DAY & DATE): _____ TIME: _____

TO (DAY & DATE): _____ TIME: _____

NAME DOG/CAT: _____ BREED: _____ COLOUR: _____

AGE: _____ SEX: _____ DATE INOCULATED: _____ K.C.? YES NO (If no I accept the risk and will not hold the Oaks Boarding Kennels Responsible)

USUAL DAILY DIET: _____ FED _____ TIMES/DAY

ANY ILLNESS/TREATMENT BY VETERINARY SURGEONS IN PAST 3 MONTHS _____

NAME OF VETERINARY SURGEON: _____

ANY DEFECTS AND/OR PECULIARITIES _____

DO YOU REQUIRE YOUR DOG TO BE BATHED BEFORE COLLECTION? YES NO

COLLECTION IF REQUIRED

DAY & DATE TO BE COLLECTED: _____ TIME: _____

DAY & DATE TO BE RETURNED: _____ TIME: _____

ACCEPTANCE OF BOARDING CONDITIONS MUST BE SIGNED BY THE ANIMAL OWNER

I agree and accept the terms and conditions of The Oaks Boarding Kennels and in the event of any sickness/illness or accident, I authorise the proprietors to call a veterinary surgeon and I understand that veterinary fees for the treatment whilst in their care will be the responsibility of the animal's owner.

SIGNATURE: _____

FEE DEPOSIT PAID _____ DATE: _____

FOR OFFICIAL USE ONLY

NUMBER OF DAYS: _____

COLLECTION/RETURN FEES: _____

AMOUNT PER DAY: _____

MEDICATION FEE: _____

TOTAL AMOUNT: _____

VACCINATION FEES IF REQ.: _____

LESS DEPOSIT PAID: _____

VET FEES: _____

BALANCE DUE: _____

GROOMING FEE: _____

ACCESSORIES: _____

TOTAL AMOUNT DUE: _____