







	<p><b>Dog Walking with Care</b>  <b>Check In Record</b></p> <p><b>Dog Name</b></p>
<p><b>Your Arrival Date</b></p>	<p><b>Check In Time</b> (8.30 – 9am)  <ul style="list-style-type: none"> <li>• <i>Details of bespoke times</i></li> </ul> </p>
<p><b>Your Departure Date</b></p>	<p><b>Check Out Time</b> (9am or 5pm)  <ul style="list-style-type: none"> <li>• <i>Details of bespoke times</i></li> </ul> </p>
<p>I am looking forward to your dog staying with me at our home. This record <b>must</b> be completed to meet the Animal Welfare Act (2018) licencing for Home Boarding and adhere to insurance requirements. Please visit <a href="http://www.dogwalkingwithcare.com">www.dogwalkingwithcare.com</a> and click onto the <b>Preparing to Board</b> page for more guidance.</p> <p>The <b>Check In Record</b> contains essential care information that may change from stay to stay. I will be able to use it to ensure that information is up to date, everything is returned to you and care routines reflect your wishes.</p> <p>Unfortunately, I am unable to board your dog if they are unwell or considered to be contagious.</p>	
<p><b>Declaration</b></p>	
<p><b>I certify that all information provided about my dog within this registration form, is complete, true, and correct. Should any factors relating to my dog’s health, behaviour, and well-being change at any time I agree to inform Dog Walking with Care immediately. Any verbal update I provide will be confirmed in writing. I understand any changes may inform withdrawal of services.</b></p>	
<p><b>Owner Name</b></p>	<p><b>Owner Signature</b></p> <p><b>Date</b></p>

<b>Owner Name</b>				
<b>Keeping in Touch</b> • (Please X)	<b>Text</b>	<b>Whats App</b>	<b>Messenger</b>	<b>Telephone</b>
	<b>Weekly</b>	<b>2 Days</b>		<b>Daily</b>
<b>Your Contact Details</b>				
<b>Emergency Person</b> - Must be a person that can take care of your dog if in an emergency I cannot. They must be able to make important decisions about your dog(s) health and well-being in your absence.				
<b>Name, address &amp; contact details</b>				
<b>Veterinary Consent</b> - Contact your practice to inform them we are caring for your dog(s) and give consent for Dog Walking with Care to access veterinary services if required on your behalf. • <b>Please attach a copy of your confirmation</b>				
<b>Veterinary Practice Name, address &amp; contact details</b>				
<b>Personal Belongings</b>				
<ul style="list-style-type: none"> <li>• 1 X Blanket <b>ONLY</b> - I can only accept bedding which is <b>FULLY</b> washable</li> <li>• No responsibility is taken for damage or loss of belongings</li> <li>• All feed or water bowls are provided</li> </ul>				
<b>Item and Description</b>				
• Blanket				
• Toy				
• Harness/Lead/Collar				
• Coat				
• Other				
<b>Help Us to Reduce Plastic Waste – Please DO NOT use single use plastic bags</b>				
<b>Food</b>				
• Pack what is needed, using a named and re- sealable container with a measuring scoop				
<b>Treats</b>				
• Pack what is needed, using a named and re- sealable container with instructions				
<b>Medication</b>				
• Pack only what is needed in their original veterinary dispensed containers, complete with instructions, using a named and re- sealable container.				





Your Dog Health Status – Please X			
	Poor	Fair	Excellent
• Teeth			
• Coat			
• Eyes			
• Ears			
• Nails			
• Breathing			
• Other			
Parasite Treatments & Vaccinations			
<b>Worm</b> <i>Must be completed 2 weeks before Check In</i>	<b>Flea</b> <i>Must be completed 2 weeks before Check In</i>	<b>Vaccination</b> <i>Must be completed 4 weeks before Check In</i>	
<b>Date</b>	<b>Date</b>	<b>Date</b>	
Evidence of current vaccinations including Kennel Cough MUST be completed at least 4 weeks prior to check in date & is a legal requirement. Please attach a copy of the vaccination card as proof			
Symptom Confirmations			
<b>Coughing</b>	YES	NO	
<b>Vomiting (last 48 hrs)</b>	YES	NO	
<b>Diarrhoea (last 48hrs)</b>	YES	NO	
<b>Infectious Disease (last 21 days)</b>	YES	NO	
• Season Cycle	YES	NO	N/A
<b>Details</b>	<b>Start Date</b> <b>Week Number</b>		
<b>Other – Insert details</b>			
<b>Details of pre-existing illness</b>			
<b>Details of pre-existing injuries/wounds</b>			
Care Instructions for Health & Well - Being			
• Teeth			
• Coat			
• Eyes			
• Ears			
• Skin			
• Nails			
• Breathing			

Medication Needs (Times & Dosage)			
			
			

**Feeding Routing**

At Dog Walking with Care dogs are fed in separate areas to avoid conflict. Your dog's eating habits may be disrupted at the start of their stay, usually appetites return to normal very quickly. However, if your dog does not eat or drink anything for 24hrs I will contact you or your emergency person in advance of seeking veterinary advice or care

Description of normal appetite (Please X)	Poor	Fair	Good

Breakfast 	Lunch 	Dinner 	Supper 
Portion	Portion	Portion	Portion
What I eat		Allowable Treats	

**Tempting Alternatives** *(Details of favourites to tempt appetite and aid settling in)*

**Behaviour**

Please tell me about any biting incidents or signs of aggression including growling and showing teeth

Please tell me about any incidents with livestock/Children/Other Dogs

**My Sleeping & Resting Routine**

<b>(Please X)</b>	<b>On a dog bed</b>	<b>In a crate</b>	<b>On the sofa</b>
<b>Where I sleep in the day</b>			
<b>Where I sleep at night</b>			

**Any Other Details & Attachments**

- ✓ **Remember a copy of your vaccination record including Kennel Cough**
- ✓ **Please remember a copy of your veterinary consent**