

Guest Registration



Owner's Name: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone #: _____ Cell Phone #: _____

How did you learn of Best In Show Pet Resort? _____

Credit Card #: _____ Exp: _____

****Emergency Contact** while you're away: _____

Phone number you can be reached at while away: _____

Has your pet boarded in the last 30 days? Yes No

Pet's Name: _____ Age: _____ Weight: _____

Male Female Colors & Markings: _____

Breed: _____ Altered, Spayed: _____

Does your pet like to socialize? Yes No Is your pet prone to hot spots? Yes No

Ear Infections? Yes No Stress-related diarrhea? Yes No

Any special instructions?: _____

Feeding Instructions: (Type of food and how often) _____

Are you picking up your pet?: Yes No

When are you planning to return?: _____

I understand that Best In Show Pet Resort is not responsible for any supplies left with my pet(s). I understand that I am required to leave a non-refundable deposit; this deposit, however can be used anytime. While my pet(s) are boarding at Best In Show Pet Resort. If they become ill or need medical attention, I authorize Dr. Polley to treat my pet(s) as he sees fit. I am aware that I will be responsible for any fees incurred. In addition, I give permission to Best In Show Pet Resort to use my credit card for any medical bills or account for services such as laboratory fees, radiology, baths, and fees for boarding my pet(s).

Signature: _____ Date: _____