



Professional and friendly services to delight your dog

Name of dog/s:

Date of Birth:

Breed of dog/s:

Owners name:

Email address

Address:

Telephone numbers:



See us on Facebook <https://www.facebook.com/BoardwithWalking>

Conditions for home boarding dogs with 'Board with Walking Ltd', 74a Church Road, Long Hanborough, Witney, Oxfordshire OX29 8JF

In order to comply with the conditions set out by my dog boarding licence issued by West Oxon District Council and my insurance, Pet Business Insurance, please complete the details below and return the form before your dog starts boarding with us.

Is your dog male or female?	Male <input type="checkbox"/>	Female <input type="checkbox"/>
If male, is he a fully intact male? (I can only board one at a time)	Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
If female, has she been spayed? (I cannot board a bitch in season)*	Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>

If your dog has any previous or ongoing medical condition or is taking medication at the time of boarding, we will discuss with you and complete an additional form**.

Delete as appropriate: My dog has ...
a previous or ongoing medical condition OR never had a medical condition, and is currently fit and well

My dog is allergic to / will have an upset stomach if eating the following:

Has your dog been vaccinated against the main canine infectious diseases for example:-
 Canine Distemper, Infectious Canine Hepatitis, Leptospirosis, Canine Parvovirus and also **Kennel Cough.**
I am unable to home board dogs that have not been fully vaccinated.

Yes Date of last vaccinations:

Please provide photocopy of, or actual vaccination record for period of boarding

Dog's microchip number

Is your dog regularly treated to prevent fleas, ticks and worms?

Yes Date of last treatment: No

Do you have pet insurance? Provider: No

Please provide the name, address and contact number of a person responsible for your dog/s in your absence and confirm that this person knows that you have nominated them. This is essential for your dog's wellbeing should we have an emergency.

Vet Practice

Phone no.

Address

In the case of an emergency, please agree or disagree that your dog may receive emergency attention by Simon or Wendy Gundry (this may include CPR, wound treatment, burn treatment, etc.)

Agree Disagree

If it becomes necessary for your dog to receive medical treatment and you cannot be contacted by telephone or other means to authorise this, please indicate that your dog may receive medical treatment, including treatment for parasites, anaesthetic, or possibly euthanasia if considered necessary by the vet treating your dog.

Agree Disagree

Please note that our Pet Business insurance does not cover vet bills relating to previous or ongoing medical conditions. We therefore cannot be held responsible for vet bills relating to those conditions whilst your dog is in my care. Please indicate your agreement to pay vet bills relating to any previous or ongoing medical condition relating to your dog.

Agree Disagree

Please indicate if you are happy for your dog/s to be exercised off lead in safe areas such as parks or woodland. If you think your dog's recall is not good, you may prefer that he/she be exercised on a long lead.
If you tick 'no' we will keep your dog on lead at all times in public spaces.

I am happy for my dog to be exercised off lead in safe areas:

Yes No

I give consent that:

Are you happy for your dog to be photographed for our Facebook page?

Yes No

I am happy for my dog to board, walk and play with other dogs in your care both at your house/garden and off site.

Yes No

I am happy that my dog has two walks of approximately 90 mins in total? (If NO, then please use the next page to describe your preference)

Yes No

An alternative lead/harness can be used to limit pulling on the lead in a group?

Yes No

My dog is allowed treats other than their own?

Yes No

I am happy for my dog to be kept in a room with other dogs in your care.

Yes No

Can dogs from the same household eat & sleep in the same room?

Yes No

I am happy for my dog to be transported by Board with Walking.

Yes No

I am happy for my dog to be crated if necessary, using Board with Walking crates.

Yes No

Enrichment activities take place (*delete if not appropriate*); play with humans (cuddles, tickles, ear rubs, lap time), basic training, balls, kongs, chews, tug toys, scatter feed, slowdown food bowl, grooming?

Please sign to confirm that the indications given above are correct and accurately represent your wishes and that you have read our terms and conditions and privacy policy.

Signature **Print your name** **Date**

Board with Walking:
Terms and conditions:
Privacy Policy:

74a Church Road, Long Hanborough, Witney, Oxfordshire OX29 8JF
<http://www.boardwithwalking.co.uk/termsandconditions.php>
<http://www.boardwithwalking.co.uk/privacypolicy.php>

REVISED
10:06 am, Jun 14, 2019

Name of dog:

Owners name:

Dog behaviour and medical summary

Is your dog used to using a crate?

What is your dog's recall like?

How does your dog behave around children?

How does your dog behave around food for example, passive or aggressive?

How does your dog behave with other dogs, for example submissive or dominant?
Do they dislike specific breeds/colours of other dogs?

How does your dog/s behave around livestock?

How does your dog/s behave around cats?

Does your dog bark whenever you leave them or at the slightest outside noise?

Does your dog have any quirky behavioural problems, even small ones?

What kind of food does your dog eat (fridge/freezer/dry)? Quantity and frequency?

What is your dog's regular walking pattern?

To be completed if applicable:

* We cannot board a bitch coming into season or in season. If you are in any doubt, please ensure you have an alternative plan so that we can move your dog out of our care and the attention of male dogs to your nominated alternative.

I confirm that I do not anticipate my dog will come into season and that if she does my nominated alternative contact will board her instead.

Signature Print your nameDate

** Please give details of any previous or ongoing medical conditions that may have affected or may currently affect your dog/s.

** Please list medications and dosage that your dog/s must take whilst in our care.

All personal data given will be stored securely at my address unless indicated otherwise and will not be shared with any other party/organisation. Please review our Privacy policy.

Days required for Day Boarding @ £20 per day					Term time only?
Monday	Tuesday	Wednesday	Thursday	Friday	Y/N
Instructions:					

Dates and times required for Home Boarding				#Days	Total Cost	Deposit 50%	Paid?	Payment pre-arrival	Paid?
From		To							
Date	Time	Date	Time		@ £25 per night Plus a possible £20 for a day board	Non-refundable within two months of arrival (please see our cancellation policy within the terms and conditions document)		Total cost to be paid in full one week before boarding commences.	
					£	£		£	

For your dog's comfort, we ask that you bring their own food, bedding, lead and bowl.