

**Great Oak Kennels**  
**Reservation Application and Boarding Agreement 2019**

Bring this application with you to:  
Great Oak Kennels  
32736 Los Encinos Road, Temecula, CA 92592  
Phone: (951) 587-6587

**Reservations**

The Registration Desk is open during the following times for Check-In and Checkout:  
Monday – Sunday: 8:00 am – 9:00 am & 6:00 pm – 7:00 pm

Requested Check-In Date: \_\_\_\_\_ Check-In Time: \_\_\_\_\_

Requested Checkout Date: \_\_\_\_\_ Checkout Time: \_\_\_\_\_

**Stay Calculations**

You are charged for the day regardless of check in time  
All guests are charged \$35 for checkout day if not picked up before 10:00am. Latest check out time is 6:00pm.  
Any guests not picked up by 6.00pm will be checked in over night at a charge of \$45 per night.

**About You**

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_ Fax: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**About Your Vet**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Emergency/Night Phone: \_\_\_\_\_

How did you learn about Great Oak Kennels? -----

**\*\*\* IMPORTANT NOTICE\*\*\***

ON your pet's arrival, Great Oak Kennels MUST receive CURRENT vaccination records. Your vet or you may email or mail information to [naomi@gokennels.com](mailto:naomi@gokennels.com)

- 1.Required vaccinations for dogs are: Rabies, Bordatella, and DHLPP.
- 2.Your dog(s) must wear an I.D tag with current telephone Number.
- 3 All dogs should be spayed/neutered.
4. Great Oak Kennels only accepts social dogs as playtime is a group activity.

We also recommend your pet be on a flea/tick prevention program.

## **About Your Pet(s)**

1. Name: \_\_\_\_\_ Male/Female: \_\_\_\_\_ Neutered/Spayed: Yes \_\_\_\_\_ No \_\_\_\_\_

Breed: \_\_\_\_\_ Approximate Weight: \_\_\_\_\_ Age: \_\_\_\_\_ Color: \_\_\_\_\_

**Disabilities/Innnesses:** Limited Mobility \_\_\_\_\_ Sight Impairment \_\_\_\_\_ Hearing Loss \_\_\_\_\_ Incontinence \_\_\_\_\_

Other \_\_\_\_\_

Is your pet currently on a flea control medication? No \_\_\_\_\_ Yes (date given) \_\_\_\_\_

*(Please note: In order to protect all guests staying at Great Oak Kennels, any guest checking into our facility infested with fleas will be given a Frontline treatment at the owner's expense).*

Current Medication(s) and Daily Dosage(s): \_\_\_\_\_

Taken for what condition(s): \_\_\_\_\_

2. Name: \_\_\_\_\_ Male/Female: \_\_\_\_\_ Neutered/Spayed: Yes \_\_\_\_\_ No \_\_\_\_\_

Breed: \_\_\_\_\_ Approximate Weight: \_\_\_\_\_ Age: \_\_\_\_\_ Color: \_\_\_\_\_

**Disabilities/Innnesses:** Limited Mobility \_\_\_\_\_ Sight Impairment \_\_\_\_\_ Hearing Loss \_\_\_\_\_ Incontinence \_\_\_\_\_

Other \_\_\_\_\_

Is your pet currently on a flea control medication? No \_\_\_\_\_ Yes (date given) \_\_\_\_\_

Current Medication(s) and Daily Dosage(s): \_\_\_\_\_

Taken for what condition(s): \_\_\_\_\_

3. Name: \_\_\_\_\_ Male/Female: \_\_\_\_\_ Neutered/Spayed: Yes \_\_\_\_\_ No \_\_\_\_\_

Breed: \_\_\_\_\_ Approximate Weight: \_\_\_\_\_ Age: \_\_\_\_\_ Color: \_\_\_\_\_

**Disabilities/Innnesses:** Limited Mobility \_\_\_\_\_ Sight Impairment \_\_\_\_\_ Hearing Loss \_\_\_\_\_ Incontinence \_\_\_\_\_

Other \_\_\_\_\_

Is your pet currently on a flea control medication? No \_\_\_\_\_ Yes (date given) \_\_\_\_\_

Current Medication(s) and Daily Dosage(s): \_\_\_\_\_

Taken for what condition(s): \_\_\_\_\_

**Note: Oral Medication administered up to twice a day w/o charge.**

### **Important Information**

Does your dog have any Aggressive Behaviors? Yes \_\_\_\_\_ No \_\_\_\_\_

Snapping or nipping at humans: Explain: \_\_\_\_\_

Snapping or nipping at animals: Explain: \_\_\_\_\_

Other (protective of food, toys, personal space, etc.): Explain: \_\_\_\_\_

Is your dog a rescue from a shelter? (Less than 1 year ago) Yes \_\_\_\_\_ No \_\_\_\_\_

**Accommodations**

Each six by eight feet room includes: A raised bed with a blanket. . Pets are allowed access to the outdoor exercise area 3 times per day for up to 45 minutes.

Prices are: \$45.00 for 1-6 Nights and \$42.00 for 7+ Nights.

**DISCOUNTS for each additional family member staying in the same suite:**

**2 Dogs** \_\_\_\_\_ \$75.00 for 1-6 Nights and \$70.00 for 7+ Nights.

**3 Dogs** \_\_\_\_\_ \$100.00 for 1-6 Nights and \$90.00 for 7+ Nights

**Meal Selections**

We recommend guests bring their own food.

Please specify portions and feeding times (i.e. ½ cup per meal, etc.): \_\_\_\_\_

We recommend this in order to keep the diet more stable to what they are used to at home. **\*\*Please put food in individual zip lock bags (i.e. one for breakfast and one for supper) for each day of stay. \*\***

What brand name of food does your pet eat? : \_\_\_\_\_

Additional special requests or other information you would like us to know: \_\_\_\_\_

**At Great Oak Kennels, making our guests comfortable is our top priority. We strongly encourage you to bring your pet's own bed and favorite toys. We also welcome any information that will be important for us to help your pet enjoy his or her stay. Please label all personal items and do not bring anything that cannot be washed in *hot water*. We are not responsible for items lost or damaged.**

**BATH & GROOMING SERVICES**

Bath & Blow Dry **\$25.00**

**In the event of an emergency. I authorize this establishment to provide the necessary treatment for my pet at my expense. (Unfortunately, we cannot be responsible for any accidents although we do our utmost to supervise all play times.)**

**Please sign below**

**Signature** \_\_\_\_\_

**Print Name** \_\_\_\_\_