



FLEUR'S FURRY FRIENDS HOME VISITS BOOKING FORM

Meet and Greet Date:.....(leave blank if not yet arranged)

Owner Information:

Name: Mr/Mrs/Miss First Name:..... Surname:.....

Address:

Postcode:

Home Phone: Work Phone;

Mobile Phone: Email;

Partner Name: Mr/Mrs/Miss First Name: Surname:

Mobile Phone: Email:

Emergency Contact: (other than yourself or partner)

Name: Mr/Mrs/Miss First Name:..... Surname:.....

Address:

Contact Number:

Boarding Details:

Start Date: Start Time:

End Date: End Time:

Has your pet(s) had home visits previously? (please give any relevant details)

.....

Pet Information:

Name:..... Breed: DOB: Age:

How old was your pet when you got it?

Size: Small/Medium/Large

Neutered Y/N

Description:

Distinctive Markings (if any)

Has your pet ever bitten/nipped either yourself, any member of the family (child or adult), carer or stranger:

Y/N If yes, please be more specific:

Does your pet live with children? Y/N

Is your pet happy and safe to interact with children? Y/N

Veterinary Information:

Name of veterinary practice:

Address of practice:

Telephone Number:

Do you have pet insurance? Y/N

Details of insurance

Please give details of any existing medical conditions and medication required:

.....

Are your pet's required vaccinations up-to-date at the time of filling in this form? Y/N (please provide a copy of the up-to-date vaccination record)

Date when next vaccination is due

Feeding

Time of feed(s) and quantity:

Brand of food:

Do you give permission for Melanie Johnson of Fleur's Furry Friends to take photographs of your pet(s) for social media purposes? Y/N

Do you grant permission for Fleur's Furry Friends to give your pet(s) occasional food treats? Y /N

Please advise of any behaviours that we should be aware of:

.....

How does your pet react to being touched (tail, paws, ears etc.)?

If your pet requires grooming whilst in the care of Fleur's Furry Friends, please provide all relevant equipment and instructions.....

Please indicate your consent to this by signing below.

PLEASE GIVE DETAILS OF ANY OTHER INFORMATION THAT WOULD BE RELEVANT OR USEFUL:

.....

I CAN CONFIRM THAT THE INFORMATION IN THIS FORM IS CORRECT TO THE BEST OF MY KNOWLEDGE

SIGNED:.....

DATE:.....

The purpose of this form is to obtain as much information about your dog in order to evaluate suitability for boarding.

Personal contact details are required so a line of communication can be maintained at all times. Likewise, the client must also feel they are able to contact the home visit provider.

Pets are individuals therefore each booking will be assessed accordingly.