

Cowboy Kennels
 5207 McCullough Ave San Antonio TX 78212
 www.Cowboykennels.com
 210-822-1166

1. Owner agrees to pay all boarding charges association with pet left in Cowboy Kennels care. _____(Ow Initials).
2. Owner agrees to pay all Veterinarian charges for pet if Eagle Veterinary Hospital provides Veterinary Services for said pet while at Cowboy Kennels. _____ (Ow Initial).
3. Owner specifically ensures to the best of their knowledge that dogs have not been exposed to rabies, distemper, parvovirus, or kennel cough within a thirty-day period prior to boarding, and cats have not been exposed to feline upper respiratory infections, leukemia or rabies in last 30 days.
4. We will accept your bed and toys but we can't guarantee the return in same condition. Please don't be mad when your dog chews up his or her bed. _____(Ow Initials).
5. For best immunity response, Bordetella and CIV should be given at least one week prior to dog entering Cowboy Kennels
6. The owner agrees to pick up and pay for said pet left in the care of CK. If the owner abandons said pet CK will do their best to find a home for the pet.

Please help us by providing a complete history on your pet.

Check-in Exam

Pet's Name & Breed:		Date:	
Owner's Name:		Pet's Weight:	
Hair Color & Length		Age:	
Rescue or Stray Dog		<input type="checkbox"/> no <input type="checkbox"/> yes-ADL <input type="checkbox"/> Humane Society <input type="checkbox"/> Other <input type="checkbox"/> homeless	
Any Food or Medication Allergies		<input type="checkbox"/> no <input type="checkbox"/> yes - details:	
Escape Artist or Fence Climber		<input type="checkbox"/> no <input type="checkbox"/> yes - details:	
Aggressive Behavior or History of Dog Bites		<input type="checkbox"/> no <input type="checkbox"/> yes - details:	
Previous Surgeries or Pre-Existing Conditions		<input type="checkbox"/> no <input type="checkbox"/> yes - details:	
Miscellaneous			
Flea Prevention		<input type="checkbox"/> no <input type="checkbox"/> yes - Date Last Applied:	
Owner's Signature:		Email:	

**If your pet is not on any flea prevention we will do a thorough check for fleas and ticks. If we feel it is necessary we will administer a Capstar pill for \$9.50.

Check-in Date: _____ Check-out Date: _____
 _____ Yes, I want my dog bathed or groomed on this date _____
 _____ No, I do not want my dog to be bathed and I do understand that my dog(s) may be dirty at the time of pick up due to outside playtimes. I have read this agreement and I understand and accept all terms _____(Ow initial).

Owner Signature _____ Date _____ Client # _____(STAFF)