



# Repeat Customer Information Form

Name: \_\_\_\_\_ Date: \_\_\_\_\_

### Contact Info (if different)

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone#: \_\_\_\_\_ Work Phone#: \_\_\_\_\_ Cell Phone#: \_\_\_\_\_

Emergency Contact Name and Phone#: \_\_\_\_\_

Veterinarian / Clinic: \_\_\_\_\_

### Feeding Instructions:

### Medication Instructions:

### Items Brought:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

9. \_\_\_\_\_

10. \_\_\_\_\_

Select any the following services you would like:

- Bath:** Ask for price estimate
- Nail Trim:** \$7.00
- Nail Dremel:** \$10.00
- TV in Room:** \$2.00 each day

Any new or existing health issues (surgery, sickness, growth, etc.)?

**YES NO** What? \_\_\_\_\_

When are you picking up your pet? Date: \_\_\_\_\_

Time: \_\_\_\_\_

**48 hour notice required from beginning date of reservation to make a change without being responsible for the entire reservation.**

You will be charged for up till the time you write down.

After **11:00AM** is another days charge. \_\_\_\_\_ **initial**

What brand of pet food do you feed and specific flavor (beef, chicken, lamb & rice, etc.)?

\_\_\_\_\_

Caroline's Pampered Pet Motel, Caroline Rose, and employees will not be held responsible for any accident, illness, injury or death of your animal while in our care. If a vet. bill occurs for your pet, we will be reimbursed for that amount plus transportation / labor fees. While we do our best to take excellent care and make the pets stay with us enjoyable as possible, there is always a possibility that something unforeseen may occur. We do have a vet on call in case of emergencies and reserve the right to seek medical attention for your pet if needed.

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

**Payment is requested at time of drop-off.  
NO DEBIT OR CREDIT CARDS**