

White Lodge Boarding Kennels & Cattery - Booking Form

Terry and Gillian Dymond, Station Lane, Kirby Bellars, Melton Mowbray, Leic's, LE14 2ED 01664 812361

Your Name:	
Your Address:	
Town/City:	
County:	Post code:
Telephone No.:	email:
Emergency Contact name and number:	

Your pet's name:	
Breed:	
Colour:	
Microchip No.	
Body score:	Age:
Sex: Male / Female	Neutered: Yes / No
Diet fed at home and times:	
Items left: Yes / No Description:	
Can White Lodge give toys or treats to your pet? Yes / No	
Interaction Preferences:	
Medical problems/Special needs:	
Date of last Flea/worm treatment and product:	
Date of vaccinations:	
Temperament:	
If applicable, please sign and complete the following: I authorise my pet (name) to share accommodation with my pet/s (name/s):	
Drop-off date:	Pick-up date:
Who will be picking up your pet(s):	
Your veterinary surgeon:	

NO DOGS OR CATS WILL BE ACCEPTED WITHOUT A CURRENT VACCINATION CERTIFICATE.
ALL DOGS WILL NEED THEIR KENNEL COUGH VACCINATION AT LEAST TWO WEEKS PRIOR TO ARRIVAL

OPENING HOURS: 9-11am and 4 – 6pm Monday to Saturday. Sunday 10.00 – 11.30 a.m. and 5 -5.30 p.m.

White Lodge Boarding Kennels & Cattery reserve the right to dispose of animals not collected within 15 days of the stated pick-up date if no communication from the owner, or the owner's agent, is received, and if efforts to contact the owners fail.

I understand that while every care will be given to my animals, they are boarded entirely at my own risk.

I enclose a deposit of £_____, which I understand, is not returnable if the booking is cancelled.

I understand that the boarding fees are due for the duration of the full booking should I collect my pet/s before the due departure date and that charges are per day of boarding.

Yes, White Lodge Boarding Kennels and Cattery may retain my information.

We comply with the General Data Protection Regulations (GDPR). Data security and privacy is very important to us. Please check the box to indicate that you consent for us to retain your data only for the purposes of our routine business activities with you. You can request at any time for your details to be removed from our files.

I AM AWARE OF THE CURRENT CHARGES, OPENING HOURS AND TERMS OF PAYMENT

Signed: _____ Date: _____