

PET DETAILS & ACKNOWLEDGEMENT FORM
Whitsunday Pet Resort Pty Ltd - ABN 90 160 560 260

Particulars of Owner/s:

Given Name/s: _____ Surname: _____
 Residential Address: _____
 Home Phone: _____ Work: _____ Mobile: _____
 Email address: _____
ARRIVAL Date (AM/PM): _____ **DEPARTURE Date** (AM/PM) _____

Yes **N/A** ref. **Particulars of Proxy Owner, Agent, or owner's Representative:**

Given Name/s: _____ Surname: _____
 Address: _____
 Home Phone: _____ Work: _____ Mobile: _____
Email address: (must provide) _____

Emergency contact:

Name _____ Phone _____ Relationship _____

Veterinary Clinic: _____ Dr: _____

Address _____ Phone _____

Pet Details & Profile No 1:

PACKAGE TYPE (please select) **Bed & Breakfast** **Platinum** **Platinum Plus**

Pet's Name: _____ Dog Cat Primary Breed: _____ Colour _____

Sex: Male Female Desexed **Weight:** _____ kg

Age in years _____ **OR** Date of birth: ____/____/____ How long have you had this pet? _____

Pet is from: Breeder Pet Shop Rescue Other: _____

Vaccination type (min. C5-dog / F3-cat): _____ Vaccination given on: ____/____/____

If vaccination **less than 14 days ago, date of previous vaccination:** ____/____/____

Veterinary Grade Parasite Prevention Yes No: If Yes *suggest bring product box, &/or receipts to assist as, *Whitsunday Pet Resort prides itself in being a parasite free zone:-*

* Flea & Tick Yes No- Product Name: _____ Last given: _____

* Intestinal Worm Yes No- Product Name: _____ Last given: _____

Heart Worm Yes No- _____ taken: Daily Weekly Monthly Annual

Profile

Attributes

- Fence climber
- Digger
- Jumps
- Protective
- Mouthy
- Fear of noise/thunder
- House / litter trained
- Obedient
- Afraid of people
- Barks excessively
- other _____

Personality

- Outgoing
- Verbally sensitive
- Timid
- Affectionate
- Pushy
- Aggressive
- Excitable
- Playful
- Independent
- Responsive

Behaviour

- Will bite
- May bite
- Growls
- Snaps
- Shows teeth
- Freezes
- Trembles
- Moves away
- Jumps up for a pat
- Perfect Pet ☺

Initial page:.....

PET DETAILS & ACKNOWLEDGEMENT FORM

My Pet

Likes

Dislikes

Hugs	<input type="checkbox"/>	<input type="checkbox"/>
Being touched on collar	<input type="checkbox"/>	<input type="checkbox"/>
Getting brushed	<input type="checkbox"/>	<input type="checkbox"/>
Other dogs/cats	<input type="checkbox"/>	<input type="checkbox"/>
Being touched on ears	<input type="checkbox"/>	<input type="checkbox"/>
Being touched on paws	<input type="checkbox"/>	<input type="checkbox"/>
Being touched on tail	<input type="checkbox"/>	<input type="checkbox"/>
Being picked up	<input type="checkbox"/>	<input type="checkbox"/>
Being touched on mouth	<input type="checkbox"/>	<input type="checkbox"/>
Being touched while asleep	<input type="checkbox"/>	<input type="checkbox"/>
Getting brushed	<input type="checkbox"/>	<input type="checkbox"/>
Retrieving a ball	<input type="checkbox"/>	<input type="checkbox"/>
Recalling when called	<input type="checkbox"/>	<input type="checkbox"/>

other _____

Does your pet engage in any unusual or repetitive behaviour? Yes No

If yes, please explain: _____

Has your pet ever bitten a person? Yes No

Has your pet ever bitten another dog or animal? Yes No

Does your pet chew or damage property? Yes No

If yes to any or all of the above 3 questions, please explain: _____

Does your pet suffer from:

N/A HEALTHY PET
 Heart Disease
 Respiratory Disease
 Seizures
 Allergies
 Arthritis
 Loss of Vision
 Deafness
 Other / comment: _____

Please provide name & frequency of any current veterinary approved medication to be given or applied: _____

Your pet/s **favourite game or anything else** we should know: _____

I have read or had explained to me, understand and agree to the:

- *Contract – Agreement to Terms & Conditions of Board – All Pets,*
- *Booking Conditions,*
- *Resort Entry Requirements*

I certify that all information provided is true and correct

Signed by the Owner /Proxy Owner / Agent / or owner’s Representative (strike out if n/a):

.....Date:.....Time:.....AM/PM

Office Use: Y/N Booking fee paid; Y/N Balance Paid; Y/N Booking confirmed, Accommodation allocated _____