

New Client Reservation Canine Form

The Lodge at New Tampa
15403 Morris Bridge Road
Thonotosassa, Fl. 33592
Phone: 813-986-2226
Fax: 813-986-2205
Email: info@TheLodgeForDogs.com



This form is designed for anyone who has not been to The Lodge for boarding. I understand as a new client, I will be charged a start-up file fee for each pet seen at The Lodge. This is a one time only fee and will be added to your first boarding stay. The fee is \$5.00 per pet.

Please accompany your pet's reservation with a Client and Pet Profile Information Form necessary for each pet you are boarding. This form can be found on our website under Boarding or under Reservations. If you can, please fill this out before your pet arrives for his or her boarding stay. This form is filled out only once, at the time of your pet's initial boarding. It will then be kept in your personal file for future reference.

After completing this form you may:

1. Print, scan and email it.
2. Print and fax it.
3. Print and drop off at The Lodge during regular business hours.

Once we receive your form we'll be happy to make your boarding reservation.

Client Information

Please choose one:

____ No, I have never been to The Lodge nor have I ever used any other services or attended any events at The Lodge.

____ Yes, I have been to The Lodge, but I have not boarded my cat or dog with you.

If yes, what service did you previously use? Dog Park ____ Grooming ____ Day Care ____ Other: _____

New Client Information

Your permanent file at The Lodge will contain the information you provide to us. This information will become private information of The Lodge at New Tampa and will never be given out.

Full Name: _____
Last First Title

Spouse's: _____
Last First Title

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: () _____ Alternate Phone: () _____

Cell Phone: () _____ Spouse's Cell: () _____

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E-mail Address: _____

Any other contact numbers you would like us to have on file (such as children, relatives, friends, etc.)

Emergency Contact: _____ () Phone or cell number: _____ ()

Names of alternative persons that will or can be responsible for pick-ups (such as children, relatives or friends).
If there are none, please leave this area blank.

Name: _____ Relationship: _____
Name: _____ Relationship: _____
Name: _____ Relationship: _____
Name: _____ Relationship: _____

Pet Information

Please list all pets that will be arriving on the dates listed below

Pet's Name: _____ Breed: _____
Sex: _____ Spayed/ Neutered _____ Approx. Weight: _____
Age: _____ Color: _____ Dog: _____ Cat: _____
Other: _____

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Age: _____ Color: _____ Dog: _____ Cat: _____

Please list any additional pets that will be boarding: _____

Boarding Stay Information

Check-In Date: (Month, Day, Year) _____ / _____ / _____ Approx. Check-In Time: **AM** _____ **PM** _____

Check-Out Date: (Month, Day, Year) _____ / _____ / _____ Approx. Check-Out Time* **AM** _____ **PM** _____

*No charges will be assessed on departure day if the pet is picked up on or before 1 pm. After 1 pm a late departure fee will be assessed. The only exceptions are a scheduled bath or grooming on the departure date.

Personalized Pick-up and Delivery

Would you like a personalized home pick-up or delivery? Yes: ____ No: ____

Date and Time of Pick-Up: Date _____ Time _____ AM _____ PM _____

Date and Time of Delivery: Date _____ Time _____ AM _____ PM _____

Contact Person: _____ Phone # of Contact Person: (_____) _____

Pick-Up or Delivery Address: _____

Pet Profile Information

Have any of your pets boarded at The Lodge before? Yes: ____ No: ____

When was the last time your pets boarded at The Lodge? _____

Was your boarding experience a positive one? If not, why? _____

Does your dog get along with other dogs? Yes: ____ No: ____

Does your dog display any aggressive behaviors? Yes: ____ No: ____

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If yes, please explain:

Lodging Information

I would like to reserve a Suite for the following pets. Please choose the appropriate Suite for your pet's boarding stay:

Pets Name: _____

Lodge Room: _____ Small Luxury Suite: _____ Large Lux. Suite: _____ Family Room: _____ Feline Condo: _____

Pets Name: _____

Lodge Room: _____ Small Luxury Suite: _____ Large Lux. Suite: _____ Family Room: _____ Feline Condo: _____

Pets Name: _____

Lodge Room: _____ Small Luxury Suite: _____ Large Lux. Suite: _____ Family Room: _____ Feline Condo: _____

Pets Name: _____

Lodge Room: _____ Small Luxury Suite: _____ Large Lux. Suite: _____ Family Room: _____ Feline Condo: _____

Pets Name: _____

Lodge Room: _____ Small Luxury Suite: _____ Large Lux. Suite: _____ Family Room: _____ Feline Condo: _____

Will each pet above have his/her own individual suite? Yes: _____ No: _____

If you have more than one pet or multiple pets sharing a Suite, please explain the desired boarding accommodations?

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Medical Information

Veterinarian or Clinic Name: _____ Phone Number: _____

Address: _____

E-mail if available: _____

Have you had your pets vaccinated on a regular basis for Distemper and Rabies? Yes: ____ No: ____

Vaccination Documentation: It is the policy of The Lodge at New Tampa that all pets must be up-to-date on required vaccinations before your pet's arrival. Dogs must be up-to-date on DHLPP vaccinations and Rabies. In addition, all dogs must be vaccinated against Kennel Cough (Bordetella) within 6 months of your dog's admission date. Cats must be up-to-date on FVRCP vaccinations and Rabies. All vaccinations must be given by a licensed veterinarian. Vaccinations given by owners or breeders will not be accepted.

Your veterinarian can fax, E-mail or mail your pet's vaccination history to our business office or you may bring in an ORIGINAL vaccination certificate signed by your veterinarian. No copies will be accepted. Check our website under Boarding – Questions and Policies, for more information.

For Our Information

How did you hear about us? Please check one or all that may apply

Yellow Pages: _____ Drove By: _____ Newspaper: _____ TV: _____ Website: _____

Advisor Magazine: _____ Recommended by a friend or family member: _____ Veterinarian: _____

Confirmation

How should The Lodge at New Tampa contact you to confirm this reservation?

Phone: ____ Cell: ____ E-Mail: ____ E-Mail Address : _____

What is the best time to contact you? _____

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Please list the appropriate numbers of contact: _____

Thank you for your Reservation. We look forward to seeing you and your pet at The Lodge. On the day you make your reservation request, please allow the entire business day for us to contact you about your reservation information. If you have any questions about your pet's reservation or the reservation process, please do not hesitate to call us at 813-986-2226 during our regular business hours.