5000 Sardis Drive Indian Trail, NC 28079



704.821.1318 Fax 704.821.1329 info@charlottekennels.com

## BOARDING AGREEMENT

(please complete one on each pet)

Owner:		Cell:	Email:
Last Address	First		
City/State			Zip Code
Spouse:		Cell:	
Last	First		
Emergency Contact:		Phone:	
Pets Name:	Breed:		Color:
Age (if over 10 need to complete elderly pet waiver) Approx. Weight:			
A 2.5% processing fee will be added for all card payments, checks and cash gladly accepted (initial)			
Spayed / Neutered / Intact Female / Intact Male			
Vet Clinic Name:		Vet Name:	Vet Phone#:
Date in	Date out	Signature	