A close-up of a sign

Description automatically generated

**Boarding rates:**

**Excluding VAT: Including VAT: Grooming rates:**

1 dog: R315 per night 1 dog: R362.25 per night ***Wash , Dry, Trim (f required) and Nails***

2 dogs: R560 per night 2 dogs: R644 per night **Excluding VAT:** **Including VAT**:

3 dogs: R735 per night 3 dogs: R845.25 per night Puppy/Small: R250 Puppy/Small: R287.50

Medium: R300 Medium: R345

*A discounted day care rate of R130 ex VAT (R149.50 incl VAT) is charged for dogs* Large: R350 Large: R402.50

*collected after 12 midday.* XL: R400 XL: R460

Nail trim: R60 Nail Trim: R69

Special long-term boarding rates are available upon request. Dogs that are extremely matted to be quoted

**Our operating hours are strictly as follows:**

**Weekdays:** 8am to 6pm

**Saturdays**: 8am to 4pm

**Sundays & Public Holidays:** 4pm to 5pm for collections and drop offs only

**Pet Taxi:** Please contact us for information.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of Owner:** | | | |  | | | | | | | | | | | | | | | | | |  | |  | | |
| **Mobile Number:** | | | |  | | | | | | | **Alternative Number:** | | | | |  | | | | | |  | |  | | |
| **Email Address:** | | | |  | | | | | | | | | | | | | | | | | |  | |  | | |
| **Arrival Date:** | | | |  | | | | | | | **Arrival Time:** | | | | |  | | | | | |  | |  | | |
| **Collection Date:** | | | |  | | | | | | | **Collection Time:** | | | | |  | | | | | |  | |  | | |
| **Residential Address:** | | | |  | | | | | | | | | | | | | | | | | |  | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | |  | |  | | |
| **How did you hear about us?** | | | | | | | | | | | | | | | | | | | | | |  | |  | | |
| **Referral** | **Google** | | | | **Website** | | **Facebook** | | **FB Community Page** | | | **Instagram** | | | **Brochure** | | | **Other (Specify)** | | | | | | | | |
|  |  | | | |  | |  | |  | | |  | | |  | | |  | | | | | | | | |
|  |  | | | |  | |  | |  | | |  | | |  | | |  | | | | | | | | |
| **Dog’s Name (1):** | |  | | | | | | | | | | | **Age:** |  | | | | | | **Sex:** |  | | | | |
| **Breed:** | |  | | | | | | | | | | | | | | **Micro Chip Number:** | | | | |  | | | | |
| **Food / Feeding Instructions:** | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Medication/Mobility/Health Problems:** | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **Spayed/Neutered: Yes or No** | | | | | | | |  | | | | | | | | **Weight:** | | | |  | | | | | |
| **Behavioural Problems:** | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Grooming Required prior to departure: Yes or No** | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Dog’s Name (2):** | |  | | | | | | | | | | | **Age:** |  | | | | | | **Sex:** |  | | | | |
| **Breed:** | |  | | | | | | | | | | | | | | **Micro Chip Number:** | | | | |  | | | | |
| **Food / Feeding Instructions:** | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Medication/Mobility/Health Problems:** | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **Spayed/Neutered: Yes or No** | | | | | | | |  | | | | | | | | **Weight:** | | | |  | | | | | |
| **Behavioural Problems:** | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Grooming Required prior to departure: Yes or No** | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Veterinary Surgeon:** | | |  | | | | | | |  | | | | | | |  | | **Contact Number:** | | | |  | |

**No dog will be accepted without a current vaccination certificate, including kennel cough (this should be given no less than 2 weeks prior to arrival). We also recommend that your dog be treated for ticks and fleas and be dewormed prior to arrival.**

**DISCLAIMER:**

* I understand that whilst every care will be given to my dog(s), they are boarded entirely at my own risk.
* I authorise you to seek veterinary advice for my dog, should you deem it necessary and I agree to cover all costs for any veterinary bill incurred.
* Should any damages be incurred to the property by my dog during his/her stay, or should the staff be injured in any way, due to a dog bite, I undertake to reimburse Shaggy Chic for the costs thereof.

**Payment in full is required upfront.**

**Shaggy Chic Pet Services (Pty) Ltd**

**ABSA Bank, Midrand**

**Cheque Account: 41 0594 2886**

**Branch Code: 632005**

**Absa Swift Code: ABSAZAJJ**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Signed:** |  |  | **Date:** |  |

|  |  |
| --- | --- |
| **Name:** |  |

**CHECKLIST:**

* **Food (provided in a sealable container, clearly labelled with the dog’s name and feeding instructions).**
* **Veterinary certificates.**
* **Treats (optional).**
* **Medication, if required (clearly labelled).**
* **Proof of payment.**
* **Please do not bring bowls or bedding. We use stainless steel bowls which are cleaned daily.**
* **Please retain leads.**

***We look forward to welcoming your pets to our home away from home.***

For further information, please contact Eileen Ashton on 082 551 5282 or [info@shaggychic.co.za](mailto:info@shaggychic.co.za) .