



## Sleepover Inventory

Dog's Name: \_\_\_\_\_ Drop off date: \_\_\_\_\_ Pick up date: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

The following items have been left with the minder

✓	Item	Description
	Collar	
	ID Tag (Personal ID / Council Registration)	
	Leash	
	Harness	
	Food	
	Treats	
	Bowls	
	Bedding	
	Toys	
	Medication	
	Shampoo	
	Brush	