Holiday Inn Asheville - Biltmore West 435 Smokey Park Highway Asheville, NC 28806



Room #:	t: 828.665.2161	Holid	
Guest Name:	f: 828.667,9744 1.800.HOLIDAY		
Breed (Dogs ONLY):		11 SECTION 12 SECTION 100	
Pet Name & Description:	ia".		
Cell Phone Number (REQUIRED):			
Please read and INITIAL by each of the f	following:		
As a responsible pet owner, I agree and/or unusual degree of soiling caused accepts no responsibility for a pet or pet waiver.		The hotel	
I understand that the costs for the requirements (including labor) will be chaquest room or suite.	repair of any damages or additional cle arged accordingly. This includes flea tre		
I acknowledge that all pets are limit public area anytime. When outside of the pet must be leashed or crated for the he need to enter and exit the property using	alth, safety, and concern of all other ho	property, the	
I acknowledge that my pet, if left a also acknowledge that if my pet is not cre service, I will not receive service for the o			
I acknowledge that I will walk my p perimeter of the hotel property, away fro responsible to clean up any refuse produ			
I acknowledge that my pet had rec immunizations. I can produce those reco acknowledge that my pet's current rabie			
I understand that I will be charged	\$25.00 per day per pet. This fee is non-	refundable.	
I acknowledge that barking, biting, tolerated. If there is a problem, I will be a reimbursement. Thank you for adhering wonderful stay!	asked to kennel my pet or leave the hot	el without	
Guest Signature:	Date:		
Staff Signature:	Date:	Pate:	

COPY FOR GUEST AND ATTACH ORIGINAL TO REGISTRATION CARD