

BOARDING AGREEMENT

Today's Date: _____ Date of Pick Up: _____ A.M. _____ P.M.

Owner: _____	Bath	Medication*
	yes no	yes no
Pets Boarding: _____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*There will be an extra charge of \$6.00 per day for the administration of medication.

Person(s) to contact in case of emergency: _____

Emergency phone number(s): _____

Pet's belongings (carrier, toys, etc.): _____

We can not be responsible for items left in the hospital.

Special instructions (include detailed medication directions and anything you wish the doctor to check for you):

FOR YOUR PET'S HEALTH

OUR VACCINATION POLICY: To insure the protection of all pets under our care, the following vaccinations must be current:

DOGS:	DHLP	CATS:	FVRCP
	PARVOVIRUS		RABIES
	BORDETELLA		
	CORONAVIRUS		
	RABIES		

I give my permission for the veterinary clinic to update my pet's vaccinations in accordance with the above policy.

MEDICAL ILLNESS POLICY: One of the advantages of boarding your pet at a veterinary hospital is that veterinary attention is readily available should the need arise. If your pet becomes ill, we will call the emergency number(s) listed above regarding your pet's symptoms, treatment options, and estimate of additional costs. If no one can be reached, however, please indicate your wishes below should your pet require treatment to relieve immediate discomfort or to resolve an important medical condition.

_____ Please perform whatever services the doctor deems necessary for the best care of my pet until someone can be reached. This includes only non-elective treatments and any necessary diagnostics.

_____ I authorize up to (check one) _____ \$100. _____ \$250. _____ other \$ _____
in medical care for my pet until someone can be reached.

_____ Do not administer any medical treatment until specific authorization is given.

I fully intend to pick up my pet on the above date specified. If circumstances change, I will notify the veterinary clinic of a new pick up date. Veterinary service during nighttime hours, some daytime hours, and/or weekends, is provided at the discretion of the veterinarian in charge. Continuous presence of personnel may not be provided during these hours.

DATE

OWNER OR AGENT FOR PET