



## **Boarding Form**

Pet Name: \_\_\_\_\_

Owner's name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Drop Off Date: \_\_\_\_\_ Pick Up Date: \_\_\_\_\_

Emergency Contact Name & Number: \_\_\_\_\_

*We are currently only open for pick up and drops off Weekdays from 9:30am - 4:45pm*

For your pet's protection, all vaccines must be current. We are currently requiring Rabies, Distemper/Parvo, Bordetella, and Leptospirosis. Your pet should be free of internal and external parasites (fleas, ticks, intestinal parasites, etc.) at time of admission. If not, the hospital reserves the right to administer appropriate flea/tick treatment at the owner's expense. \_\_\_\_\_

Initials

### **Food Instructions:**

☐ Own Food: Type: \_\_\_\_\_ ☐ Hospital Food:

Frequency: Once / Twice / Free Feed Amount: \_\_\_\_\_

Has your pet eaten today? Yes / No

**Medications:**

Medication: \_\_\_\_\_ Dose: \_\_\_\_\_ Given today: Yes / No  
Medication: \_\_\_\_\_ Dose: \_\_\_\_\_ Given today: Yes / No  
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Medication: \_\_\_\_\_ Dose: \_\_\_\_\_ Given today: Yes / No

**Is your pet currently on Flea and Tick prevention? Yes/No**

Medication name: \_\_\_\_\_

**Special Notes:** \_\_\_\_\_

**Please check any additional services you would like your pet is boarding:**

- ☐ Go home Bath (Small K9 - \$60 Medium K9 - \$80 Large K9 over 85lbs - \$100)  
☐ Day before pick up ☐ Day of pick up (Pick up after 2:30pm to allow ample drying time)
- ☐ Nail Trim (Feline and Small K9 - \$30 Medium K9 - \$40 Large K9 over 85lbs- \$45)
- ☐ Anal Glands \$35

If a problem should arise with your pet while under our care, we need permission to treat your pet. We'll make every attempt to contact you about an incident. If any property damage is incurred due to any aggressive behavior, the minimum amount will be \$50 \_\_\_\_\_

Initials

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature