

Boarding Form

Client: _____ **D/O Date** _____ **P/U Date** _____ **Time** _____

POLICY STATEMENT.....PLEASE READ CAREFULLY

For your pet's protection, all vaccines must be current and administered by a veterinarian. Bordatella, a specific kennel cough vaccine is required every six months for dogs. Your pet must be free of external parasites, if not, treatment will be done at your expense. Research Pet & Bird Hospital will not be responsible for the treatment costs of any disease contracted here. A medication fee will be charged to give routine medications and for involved feedings. Technician care will be charged for more involved daily treatments and medications. Pets not picked up within 10 days of the date listed above will be considered abandoned. Sorry, we cannot be responsible for any personal belongings left with your pet. Dogs are exercised three times daily in our fenced yard. Please advise us if your dog is inclined to dig out or climb fences so we may take extra precautions. If an emergency should occur, I authorize emergency treatment and will be responsible for those costs.

AUTHORIZED SIGNATURE _____

EMERGENCY CONTACT NUMBER

NAME _____ **RELATIONSHIP** _____

Rates are per night and include a climate-controlled environment. Science Diet adult food, and bedding for dogs and cats. All other small animals and birds must bring their own cage.

Patient: _____ **Weight:** _____

Diet: Our Food One Time Daily

How Much: _____

Meds: Yes No

Meds Instructions: _____

Bath: Yes No

Date of Bath: _____

NT: Yes No

Treatment: Yes No

Treatment Needed: _____

Vaccinations: Due

Vaccines Needed: _____

Playtime: Yes No **How often:** _____

Belongings: _____

Check In _____ **Check Out** _____ **Payment** _____