



BOARDING CONSENT FORM



We welcome you and your pet to our boarding facility. We promise to provide your pet with a quiet, comfortable, clean stay. Our facility is overseen by our veterinary staff, thus insuring prompt medical attention, if any should become needed.

Hello, my name is “ _____ ” _____, and I am a _____

year old _____. I will be boarding from ____/____/____ until ____/____/____ and

plan to be picked up at ____:____ (a.m. / p.m.). I eat _____ cup(s) of food per day, which is normally served

to me in the (a.m. / p.m. / both). Medications/Instructions (if any): _____

There is a \$ 3.75 per day medication charge additional to boarding fees.

Did you bring your pet’s food from home: Yes / No

Would you like for your pet to have a bath before going home: Yes / No A toenail trim: Yes / No

As some pets may soil in their cages, a bath is highly recommended if your dog’s stay is longer than three nights. Additional charges do apply.

Some animals may not be able to be bathed if we are unable to handle them or we may not have the proper equipment for some of the hard to groom breeds

Additional requests/notes from the pet’s parent: _____

Requirements:

For safety and sanitation reasons, we require proof that the following conditions be fulfilled by all of our boarders. If a boarder is not current at the time of admittance, our animal hospital has the authority to update these services and you will be charged accordingly.

Feline Requirements: FVRCP, Fely, Rabies, Fely/FIV Test, & fecal

Canine Requirements: DA2PP, Lepto, Bordetella, Rabies, HW Test, & fecal

Medical Care:

Should your pet need medical care while it is boarding with us, it will be provided by our veterinary staff and you will be charged at our normal prices for these services. We will make every effort to reach you or your emergency contact person if a medical need arises and this is why it is imperative that we have an emergency contact number where we can reach someone at all times during your pet’s stay. If we are unable to reach someone, we will still proceed with what we feel is in the best interest of your pet’s health.

Authorization/Emergency Release:

I have read the information/requirements above and agree to the terms set by Ash Veterinary Clinic. I also grant them the authority to perform required services, as well as treat my pet should it become ill while boarding. I am aware that there are inherent dangers involved with anesthetic and surgical procedures. I agree to be responsible for any charges incurred while my pet is in the care of this facility and I understand payment is due at the time my pet is released from the hospital. I also understand no staff will be attending to my pet overnight. (Pets needing special care may be referred to a 24 hour care hospital, at the owner's expense.)

SIGNATURE: _____

Phone number where you may be reached: _____

Emergency contact name: _____

Emergency phone number: _____