



PET BOARDING ADMISSIONS FORM

133 28TH STREET SOUTHEAST

1-616-241-3651

Client Last Name: _____

Client Account #: _____

Pet Name: _____

Boarding Start Date: _____

Discharge Time: A.M. ____ P.M. ____

Boarding End Date: _____

(After 12-noon, additional day fee added)

Phone number where you can be reached while your pet is boarding: () ____ - ____.

Alternate emergency name: _____ and, number: () ____ - ____.

Client initial > Emergency treatment is hereby: ____ Authorized ____ Declined

Alternative pet release agreement:

I authorize _____ to pick up my pet. Their telephone number: () ____ - ____.

VACCINES: The following vaccines are required for boarding. If your pet has been vaccinated elsewhere, proof of current vaccines is required. You will be charged an exam fee if your pet is due for any of these vaccines at time of intake or if you would like them updated while staying with us.

Dogs: Distemper (DALPP)
Rabies
Bordetella (ITT)

Cats: Distemper (FVRCPC)
Rabies

Ferrets: Distemper
Rabies

PARASITE CONTROL:

All boarders are required to have a negative-result parasite check within 6 months of boarding.

MEDICATION INSTRUCTIONS:

Please notify admitting receptionist of any medical conditions, medications or treatments that we should be aware of.

If you are leaving medication(s) with us for your pet, please indicate the type, dose and when last given below:

Type: _____ Dose: _____ Last Given: _____

(There is an administration fee of \$2.00 per day.)

FEEDING:

All dogs will be fed Purina EN diet. All cats will be fed Hill's C/D formula. We will be happy to feed other diets if requested and provided by the owner. Prescription diets are available if requested (additional fee will apply).

Diet instructions: Own food _____ Clinic food _____

Please feed _____ cups/cans _____ times/day.

EXERCISE:

Unlimited walks are included with each day of boarding.

OTHER SERVICES: (Initial those desired while your pet stays with us.)

____ Toe nail trim (\$19.00)

____ Urinalysis (\$42.00)

____ Ear cleaning (\$27.70)

____ Bath (\$23.70)

____ Heartworm test (\$38.00)

____ Fecal (\$22.00)

____ Exam with Doctor Explain: _____

____ Other. Explain: _____

Owner's Release: Occasionally, boarders do not intend to, but sometimes they do, make a mess of themselves. We must give them a bath when this happens. If this occurs, you will be asked to pay for the bath(s). **Initial:** ____

I understand the doctors and staff of the Animal Clinic, Inc. use all reasonable precautions against illness, injury, escape or death of my pet. Therefore, I will not hold the doctors or staff of the Animal Clinic, Inc. liable or responsible for treatment.

Owner's Signature: _____ Date: _____ Receptionist Initial: _____

Kennel Assistant Initial: _____ Flea Check: _____

