

Penasquitos Pet Clinic

BOARDING AGREEMENT

Owner _____ Day In _____ Day Out _____

Pet's Name _____

EARLY BIRD DISCOUNT – No charge for day out if picked up before 10 a.m.

Belongings:

Leash Collar Bedding _____ Toys _____

Treats _____ Food _____ Bowls _____

Medication- Name of Medication _____

How many times a day does your pet receive medication? _____

Has your pet received any medication today? Yes No

How does your pet take his/her medication? _____

Will a refill of your pet's medication be necessary? Yes No

Did your pet eat today? Yes No

How many times a day does your pet eat? _____

Does your pet have any special feeding instructions? Yes No _____

Is your pet fearful? Yes No If so: Cats Dogs People other _____

Doctor please check _____

*DISEASE PREVENTION POLICY

To insure the protection of all of the pets entrusted to our care, written proof of the following vaccinations must be presented: Dogs: DHPP, Bordatella, Rabies. Cats: FVRCP, Rabies.

*PET HYGIENE POLICY

For the benefit of all of the pets staying with us your pet(s) must be clean and free of fleas upon admission. Your pet will be checked at the time of entry and you will be immediately advised if a bath or flea preventative is necessary. If a bath or flea preventative is needed there will be an additional charge.

*V.I.P.

We give conscientious and affectionate care to each pet left at our hospital. However, if your pet has special needs or you want additional care or treatment please advise us.

Additional exercise (\$2.50 per time) Yes No

Combing/ brushing (\$2.50 per time) Yes No

Medication (\$1.00 per time) Yes No

How many days would you like special treatment? _____

I understand that SHOULD MY PET REQUIRE MEDICAL CARE while boarding I give my permission for said treatment. I request that every reasonable attempt be made to reach me by telephone, but that I do accept financial responsibility for all charges incurred and agree to pay for such charges at the times of release of my pet. If I do not pick up my pet within 14 days of the designated release it can be considered abandoned and Penasquitos Pet Clinic can dispose of the pet. In the event of such disposal (adoption, sale, or euthanasia) I will not be relieved from paying all accumulated charges nor from paying all legal fees/court costs.

Client's signature _____ Date _____

Phone where I can absolutely be reached _____

Local contact: Name _____ Phone _____

