

Boarding Information Form

Owner: _____ Pet's Name: _____

Board from: _____ to: _____

Brand of Pet's Food _____ Dry / Canned

Amount fed in the morning: _____

Amount fed in the evening: _____

May we give your pet treats? _____

Does your pet have any allergies to any foods or drugs? _____

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

What kind? _____

Belongings being left with your pet are: _____

Medication Name	Dose in the AM	Dose in the PM	Given Today?

Phone number where you can be reached: _____

Emergency Contacts: Name: _____ Phone # : _____

If you would like for your pet to be bathed while here, it must be scheduled with the receptionist before you leave. If your pet has a bath the day they are scheduled to go home, they can be picked up after 3:00pm. There are no baths on Saturdays, Sundays, or Holidays.

Would you like to schedule a bath for your pet? YES _____ NO _____

Any pet with fleas or ticks WILL be treated at the owner's expense.

I understand that in the event of an emergency, the staff will contact me promptly. If myself or my emergency contact are unavailable, I give permission for the veterinarians to treat my animal to the best of their ability. I understand that I will be responsible for payment of services rendered. _____ (Initial)

I decline any medical treatment in the event of an emergency on my pet: _____ (Initial)

Signature of Owner: _____ Date: _____