

BOARDING FORM

CLIENT'S NAME _____ PET'S NAME _____

PART I – FEEDING AND SERVICE NEEDS (Please check)

- I WILL PICK UP MY PET ON _____ (DATE/TIME)
- I BROUGHT MY PET'S OWN FOOD _____
- MY PET IS ON A SPECIAL DIET _____
- MY PET NEEDS A BATH, BRUSH OUT AND NAIL TRIM
- MY PET NEEDS A NAIL TRIM ONLY
- MY PET NEEDS ANAL GLANDS EXPRESSED
- MY PET NEEDS AN EXAMINATION (PLEASE SPECIFY) _____
- I AM LEAVING THE FOLLOWING ITEMS WITH MY PET (USE SPACE PROVIDED BELOW FOR ITEMS). ALTHOUGH

WE TRY TO MAKE SURE YOUR PET GOES HOME WITH WHAT HE/SHE CAME WITH, HOWEVER WE CANNOT BE RESPONSIBLE FOR LOST ITEMS OR ITEMS LEFT HERE WHILE BOARDING.

- PLEASE SEE SPECIFIC NOTES ABOUT MY PET BELOW (USE SPACE PROVIDED FOR NOTES)

PART II – MEDICATIONS

- MY PET IS ON MEDICATION (PLEASE SPECIFY MEDICATIONS, DOSES AND WHAT THE NEXT DOSAGE)

MEDICATION	INSTRUCTIONS	FREQUENCY OF DOSE

PART III – EMERGENCY INFORMATION (PLEASE CHECK ONE)

- Please do not medically treat my pet until specific authorization is given.
- Please treat my pet if he/she becomes ill up to (\$) _____ before calling me.

Two emergency numbers that I can be contacted at are _____ / _____

I understand my pet will be treated for fleas, at my expense, if present during boarding.

X _____
Signature Date