

Boarding Drop Off

Pet's Name: _____

Drop-Off Date: _____ Pick Up Date: _____

Where can we reach you while you are gone?

- 1) _____
- 2) _____

Emergency Contact in case you are unreachable:

Current Medications & When they are to be given:

- 1) _____ @ _____
- 2) _____ @ _____
- 3) _____ @ _____

Did your pet receive his/her medications this morning? Yes _____ No _____

If so, what medication and when was it given? _____

Are any other medications due today? If so...when?

DIET:

Type of food: _____ Amount per feeding: _____

Frequency of feeding: _____

Did he/she eat today? If so when? _____

Are there any items that you have brought for your pet's stay?

(Please list and describe each item) _____

Extra Care Boarders: If your cat becomes ill or has a condition which worsens during boarding, your cat will be treated as a **hospitalized patient** at the discretion of the doctor. During this time your cat will receive necessary veterinary examinations, treatments and medications. Your cat will be returned to boarding status when he or she is again healthy. We will attempt to contact you at the number(s) listed above in the event that hospitalization becomes necessary and to give you updates on your cat's progress. Your signature below indicates your understanding of this policy and your authorization of necessary treatment.

Rates:

Boarding: \$21 per night

Administration of oral medications: \$1.50 per dose

Administration of Insulin: \$5.00 per injection

Hospitalization: \$35 per night plus medications and treatment

(Signature)

(Date)