



Boarding Form

Boarder Name | Patient #: _____

Breed | Color | Age | Sex: _____

Dates Boarding: _____

Contact: In the event we need to contact you or a guardian during your pet's stay, please list who is best reachable:

Name and contact number: _____

Feeding: Did you bring food for your pet's stay with us? Yes No

If so, what did you bring and what are the feeding instructions? _____

| Bathing: | 0-20 lbs. | 21-40 lbs. | 41-60 lbs. | 61-80 lbs. | 81-100 lbs. | 100+ lbs. | 3+ Nights Stay |
|-----------------|-----------|------------|------------|------------|-------------|-----------|-----------------------|
| Deluxe Bath | \$14 | \$19 | \$24 | \$29 | \$34 | \$39 | Free |
| Premium Bath | \$39 | \$44 | \$49 | \$54 | \$59 | \$64 | \$25 |

The Deluxe Bath includes a nose-to-tail lather & rinse, towel dry, and brush out.

The Premium Bath includes the Deluxe features plus a nail trim, anal gland expression and ear flushing.

*Cats may not receive bath if too aggressive ****Pick up for Premium Baths is after 4pm.**

Medications: Boarders with medication will receive a \$3 daily administration fee. Insulin dependent boarders will receive a \$6 daily administration fee. Please list all medications below. Continue on back if needed.

| | | |
|------------------------|---------------------|-----------------------------------|
| <u>Medication Name</u> | <u>Instructions</u> | <u>Time & date last given</u> |
|------------------------|---------------------|-----------------------------------|

- 1)
- 2)
- 3)

Belongings: Due to handling, belongings may not be returned in the way they were received. Please list all belongings:

Concerns: Please let us know if any of the following applies to your pet:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Food aggression | <input type="checkbox"/> Human aggression | <input type="checkbox"/> Storm anxiety | <input type="checkbox"/> Inappropriate chewing |
| <input type="checkbox"/> Animal aggression | <input type="checkbox"/> Kennel aggression | <input type="checkbox"/> Separation anxiety | <input type="checkbox"/> Food allergies |

Illness: Should your pet become ill, the doctor will examine your pet. How would you like us to proceed?

- Do not proceed with any diagnostic or treatment recommendations without speaking with the contact listed above.
- Proceed with diagnostic and treatment recommendations at the doctor's discretion not to exceed \$ _____ in addition to regular boarding fees before speaking with the contact listed above.
- Proceed with any diagnostic and treatment recommendations at the doctor's discretion.

***If your pet develops diarrhea, we will administer Endosorb at your expense to firm up the stool.**

***If your pet presents with fleas, we will administer a Capstar at your expense to kill the fleas.**

Preventative Health: We require all boarding dogs to be current on an annual wellness exam, annual or triennial Rabies vaccine, annual or triennial DHPP, biannual fecal test (negative), biannual Bordetella vaccine and annual Influenza H3N2 and H3N8 vaccine.

We require all boarding cats to be current on an annual exam, annual Rabies vaccine, and annual or triennial FVRCP vaccine. ***If your pet is missing any of these necessities, we will perform them at your expense.**

***An exam must be performed by our veterinarians within the past 6 months to receive vaccines/medicine.**

Release: By signing below, I am releasing my pet listed above to the care of the doctors and staff of Aldine Westfield Animal Hospital (AWAH). I understand my pet may need to be examined, tested and/or vaccinated and these treatments will be performed at my expense. I understand and agree that the contact listed above may make medical and financial decisions on my behalf during my pet's stay at AWAH.

Signature

Print Name

Date