BOARDING AGREEMENT

Person presenting pet for Boarding must have <u>PROOF</u> of current vaccinations. If they are not available, we will vaccinate the pet at the owner's expense according to our hospital policy.

Owner: <first-name> <last-name> File: <folder></folder></last-name></first-name>		
Patient: <animal></animal>		
Surgical Procedures to be performed of	during your pet's stay:	
Emergency Contact	Phone	
Type of Medication		
Directions for Giving		
Type of Diet		
How Often	How Much	
Pick up Date	I ime	
Reasonable precaution will be used a will not be held liable for problems followed. I understand that any problet the staff veterinarians and I assume further	that develop provided reaso om that develops with my pet	onable care and precautions were t will be treated as deemed best by
If your dog is boarded a minimum of 2 go home. If picked up prior to 2pm, th		omplimentary bath on the day they
SIGNATURE:		DATE: