

Boarding and Day Care Admission

Dr. Rand – Dr. Seibert

Client Name: _____	Pet Name: _____
Address: _____ _____	Phone Number: _____

Arrival Date: _____ Departure Date: _____ Personal Items:

Diet: _____ Have you fed

<animal> today? YES NO

Amount given: _____ Time(s) of day given: _____

Medication instructions:

Name: _____ Instructions: _____

Name: _____ Instructions: _____

Have you given <animal> medications today? YES NO

Eating and drinking normally? Y/N

Urinating and defecating normally? Y/N

Any vomiting or diarrhea? Y/N

Coughing or sneezing? Y/N

Any previous vaccine or medication reaction: Y/N

Heartworm/Flea Prevention: _____

Any refills needed? Y/N

Notes: _____

Medical examinations, Natural Disasters, and Emergency Contacts: While your pet is in our care, one of our doctors will perform a cursory examination of your pet along with the multiple times a day a nurse will be caring for and monitoring your pet. If a medical condition is discovered that we feel should be addressed before your pet goes home, we will make every attempt to contact you to discuss. **If we are not able to reach you, is there an amount of medical care you wish to approve for your pet? Yes / No**

If so, what is the dollar amount you wish to approve up to? _____

In the unlikely event that your pet should fall ill or become unresponsive and you are unreachable. We are trained as veterinary professionals to immediately respond and give life-sustaining care to the best of our ability. This does incur certain costs that you will be responsible for. We will only not perform these duties if it is your wish.

_____ Yes, please do Cardiopulmonary Resuscitation (CPR) if my pet should ever need it during <his> stay

_____ No, do not resuscitate (DNR) my pet if <he> should need it during the course of <his> stay

In the unlikely event that your pet needs emergent care and you are unable to be reached, who would be your emergency contact? You should also be aware that in the rare occasions we have natural disasters that may be threatening our area, we will act in the best interest of your pet by **contacting you ahead of time and relinquishing your pet back into your care.** We are not a hurricane shelter and cannot house or care for any pets during natural disasters. The best place for your pet to be in this type of event is in your care and we will make every reasonable attempt to contact you in the event of a natural disaster.

Emergency Contact Name: _____

Emergency Contact Phone:

(____) _____

Basic boarding package: Cursory physical exam by veterinary technician upon arrival. Exercised two to three times daily. Feeding our Science Diet Maintenance dry, canned, or mixed food. If you prefer to bring in your pet's regular diet or if your pet is on a special diet for a medical condition, please bring your pet's food. Cleaning pet's environment, as needed. Heartworm and flea/tick prevention can be given (as supplied by owner).

Requirements for Boarding: Our kennel requires current Distemper and Rabies vaccinations for all dogs and cats, and Bordetella for all dogs. If proof of vaccinations is not readily available, we will do these vaccinations at owner's expense.

Flea preventative will be administered to any pet with live fleas at owner's expense as well.

Would you like <animal> to have a spa experience while vacationing here? The spa experience includes a bath, blow dry, nail trim, and ear cleaning for the special rate of \$40.00.

Owner's Signature: _____

Date: _____

Admitting Nurse Signature: _____

Date: _____