

BOARDING ADMISSION FORM

| Client Name: | Date: |
|--|--|
| Client Contact Number: | Boarding Until: |
| Pet Name: | |
| Bath Requested: YES [] NO [expression) |] (Bath includes nail trim, ear cleaning and anal gland |
| *If requesting a bath, it will be perform home after 4pm* | ned the day of pick up and your pet will be ready to go |
| Feeding Instructions: | |
| OWN FOOD KE | NNEL FOOD (Hill's Sensitive Stomach Dry food) |
| Amount in cups: Freq | uency: |
| List and Medications/Treatments to be | performed while here: |
| | boarding will be charged a daily medication administration fee** |
| Would you like your pet to participate | in Water Wednesday? <mark>YES [] NO []</mark> |
| What activities does your pet like? (lazy | y walks, fetch, Frisbee, tug of war, etc) |
| If the harve NEVER seen your not before | a physical man will be performed by the dector mean amized |
| | <i>a physical exam will be perfomed by the doctor upon arrival.</i> <u>e doctor to examine your pet before you leave.</u> |
| *For your pets saftey the | following vaccinations/services are required: |
| | HLPP, CIV, Bordetella, Heartworm Test, Fecal |
| | t: Rabies, FVRCP, Fecal a Capstar (flea medication) at admission |
| If your pet is NOT up to date on any of | f the services listed above, they will be performed at check in. |

_____ (Initial)

Patient Care Mission

Any animal under our care will be treated with compassion as if it were one of our own. Every effort will be made to ensure your pet's needs are met while we provide a safe and trusted place for them to visit. If your pet should become ill during their stay, it is our policy to treat them medically. Every effort will be made to notify you and provide an estimate for cost of care. However, immediate care will be provided without notification if necessary in the event of an emergency at owner's expense.

For non-emergency medical issues notated while boarding:

[] Please treat my pet as required; you do not need to call me for permission

[] Please Do **NOT** perform any diagnostics or treatments without my consent **Please make sure we have appropriate contact numbers for you**

Name and Contact Phone Numbers

Personal Items Policy

It is our intention to provide an environment of comfort, as well as safety, for our boarding patients. We provide blankets, bedding, bowls, etc. that are easy to maintain, clean, and sterilize for all patients.

If you choose to bring other items from home such as toys, bones, blankets or bedding, they can be used for your pet. We will make every effort to protect your belongings and return them back to you at the end of your pet's stay. However, these items can be "misplaced" or may be returned in lesser condition than how they arrived. **Please do not leave any items** *that cannot be easily replaced. East Coweta is not responsible for any personal items left.*

____(Initial)

Owner's Release

- **1.** Pets presented for boarding with fleas/ticks will be treated at owner's expense, as we are a flea-free facility.
- **2.** Pets that are known to be aggressive may not be walked during weekend hours for the safety of our kennel staff and your pet.
- **3.** Pets that develop diarrhea during their boarding stay will be checked for intestinal parasites and treated appropriately at owner's expense.
- 4. Do we have permission to use photos of your pet on our website/social media?

Yes [] No []

Signature