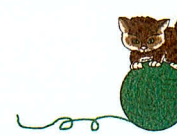




BOARDING FORM



Today's Date _____ Return Date _____

Pet's Name _____ Owner's Name _____

❖ If you have more than one pet, do you want them boarded together?
YES or NO (please circle)

❖ If you are leaving food, what are your feeding instructions?

❖ Are you leaving: any toys, blankets, leash, etc? Please list all...

❖ **Is there a person(s) authorized to make all medical decisions for you, including any treatment or euthanasia (putting your pet to sleep)?**

YES or NO (please circle)

Emergency contact name _____

& telephone number _____

❖ In the event that no one can be reached, I DO or I DO NOT (please circle) authorize the doctor to perform workup / treatment as necessary for my pet's well being in an emergency situation. (up to \$200.00).

❖ Would you like your pet to have a bath before going home?

❖ Does your pet need any other services while here?

❖ Is your pet currently taking any medication?

Please list type of medication and dosing instructions.

Medication

Instructions

**We require all boarders to have a one time flea treatment of Capstar.
The cost for this is \$4-\$5.**