



Springdale Animal Hospital

2903 West Huntsville Ave. Springdale, AR 72762

479.751.2327 (phone) 479.751.2860 (fax)

Dr. Elizabeth Carender Dr. Christy Booth

Dr. Deborah Overman

Boarding Release

Please fill out for your pet's boarding visit. You may fax it back to 479-751-2860 or bring it with you at the time of your appointment.

Pet's Name: _____

Pick-up Date: _____ AM PM

Please call ahead if you need to pick up early so that we may ensure any needed treatments are completed and your pet's file is ready. This prevents a delay at pick up.)

Your pet _____ **is due for the following:** _____.

Our kennel has a "NO FLEA OR TICK" policy. If your pet is examined and found to have fleas or ticks, they will be treated. The cost ranges from \$4.50 – \$20.00 per dose per pet. Even pets that are "indoors only" can present with fleas. If your pet is on a monthly flea/tick control, please list the product's name and when it was last given.

Product Name: _____ **Last Given:** _____

Pets that are boarded must be FULLY VACCINATED within the last year. Proof of vaccination status is required. If your pet is not current on their vaccinations, we can vaccinate them at the time of admission.

Pets are fed Science Diet Maintenance dry food during their stay. If your pet has a special nutritional need, please consult with our receptionists. DAILY MEDICATIONS, IF NEEDED, WILL BE GIVEN AT A NOMINAL COST.

Boarding can be a stressful time for your pet. Gastrointestinal upsets or other problems can occur. If your pet should have a problem while boarding, do we have permission to treat your pet?

PLEASE CHOOSE ONE: _____ **I do authorize treatment**

_____ **I do not authorize treatment**

We can microchip your pet for \$30.00 Yes _____ **No** _____

City of Springdale and Fayetteville require this!

Any special instructions or medications that need to be given? _____

Any personal belongings? _____

Please list the amount and times your pet is currently fed: _____

Please list persons authorized to pick up your pet: _____

Emergency Contact Phone Numbers: _____

Signature: _____ **Date:** _____

Note: We are not responsible for any lost or damaged items left with your pet while your pet is boarding. WE DO NOT OFFER SUNDAY PICK UP TIMES