Dog Boarding Agreement

<animal> will be boarding with us from ___/___/___ to ___/___/___

Please call us 24 hours in advance if this schedule changes

Owner <**first-name**> <**last-name**>

Emergency Numbers_____

Boarding charge: $35.80 per night

Note: All pets receive a Capstar flea treatment (no charge) Does your pet have food allergies? Yes / No

<animal> must be up-to-date of the following: If vaccinations were done at this clinic, please skip this section.

Vaccine	**Where Vaccinated**	**Date of last vaccination**
DHP+P	_____	_____
Rabies	_____	_____
Bordetella (3 days prior to boarding)	_____	_____

Do you want <animal> to have a bath on the day of pick up? PLEASE mark appropriate box. (PICK UP AFTER 4PM)

____NO BATH ____Full bath includes $35.00- 58.50 (anal glands, nails, ears) ___ No-Frills @ $20.31 (bath only, no extras) Long hair $26.56

Is <animal> chewer of bedding?

Is <he> on medication? Yes No If yes, describe_____

Has <he> been medicated today? No Yes

What does <animal> eat?_____how much? _____ How many times per day? _____

We encourage you to bring your own food to avoid a sudden change in diet..

If not, we feed Hill's Science Diet adult dry food.

Please read and sign the statement below:

Should an emergency occur with <animal>, every effort will be made to contact me first with a treatment plan and estimated costs before treatments proceed. If I cannot be reached at any of the phone numbers above, treatments will proceed and the charges will be added to my account to be paid on pick-up day.

_____

signature

Please list any personal items being left with pet.