COATS VETERINARY HOSPITAL BOARDING INFORMATION SHEET

CLIENT:		PET:	
BOARDING DATES: FROM:	TO:	BREED:	
Please leave a number where we can reac Emergency contact name and phone num			
Did you bring your pet's own food? Feeding instructions: Free feed	Please list type ar Feed a.m. only	nd amount to feed Feed p.m. only	Feed a.m.& p.m
Canine Boarding Options:	Options: Feline Boarding Options:		g Options:
Petapalooza : \$39 (inclu Additional Resort Services: Rub A Dub : \$20 (bath a	\$24 (includes nature wal udes DDC or 3 long nature and towel dry) (must have an appointm	e walks and Bath) Pampered Pooch: \$30 (bath, ent with Kathy)	ndo: \$28 nail trim, ear cleaning & air dry)
It is Coats Veterinary Hospitals policy o	of this hospital that:		
1. Boarding animals MUST be current on parasites or they must be updated. WE st while they are staying with us! If we notice	crongly recommend that	your receive monthly flea prev	ention, and we can prescribe this
2. If your pet becomes ill during his/her s your bill will be adjusted accordingly.	tay and you or your eme	rgency contact cannot be reach	ed, we will treat as necessary and
3. We will do our best to return any perso items.	onal items to you safely. V	Ve cannot be held responsible f	for damaged, misplaced or lost
4. Please list all belongings you are leavin			
5. By signing below, you are releasing Cocome from any products, items, toys, food			
Is anyone else authorized to pick your pet	t(s) up on your behalf? If	so, please write their name bel	low:
If your pet is currently on any medication	that you wish us to adm	inister, please list those below:	(additional \$3 fee may apply)
Medication	Amount	AM/PM	M When was last Given:
We love making pets Facebook famous! F website, and other marketing materials w			
Signature			Date