

T.L.C. Animal Hospital / Bed & Biscuit

Boarding Check-in and Release Form:

DATE OF CHECK IN: _____

DATE OF PICK UP: _____

CLIENT NAME: _____

PET NAME: _____

Thank you for choosing TLC Animal Hospital / Bed & Biscuit for the care of your pet. Please take a few minutes to answer some important questions that will help is make your pet(s) stay a healthy and enjoyable one.

1. In case of emergency, please notify _____ at _____
(Name) (Phone Number)

or _____ at _____

2. For the health and safety of all pets in our facility, **we require proof of current vaccinations and a negative fecal check.** Any pet that is infested with parasites (internal parasites/worms, fleas or ticks), or is not currently vaccinated in accordance with our policy, will be treated and/or vaccinated at the owner's expense. All dogs will be given a Capstar for fleas upon entry.

Required Vaccinations:

• DOGS: Rabies (\$18) _____ DHPP (\$22) _____ Bordetella (\$18) _____ Fecal (\$24) _____

• CATS: Rabies (\$18) _____ FVRCP (\$24) _____ Fecal (\$24) _____

If my pet was not vaccinated at TLC Animal Hospital, I agree to the release of my pet's previous medical records.

*Arrangements for isolation accommodations are available for pets with medical concerns preventing vaccinations.

3. Are there any MEDICAL NEEDS (ears, eyes, skin, etc.) that need to be performed while your pet is boarding? ____ YES ____ NO
If yes, what would you like done? _____

4. Are there any medications that need to be given to your pet? ____ YES ____ NO
(Medications not supplied by owner will incur additional charges.)

Medications to Be Given:

1. _____ # tablet/capsule/ml (s) _____ # times/day

2. _____ # tablet/capsule/ml (s) _____ # times/day

3. _____ # tablet/capsule/ml (s) _____ # times/day

5. Will you be leaving food for your pet(s)? ____ YES ____ NO (If a special diet needs to be opened, the food will be added to the bill.)

How many times a day do you feed your pet(s)? _____ How much? _____ cup/cans

6. Please list any other items left with your pet _____
(Please note that all items must be marked permanently with owner name and that we are not responsible for lost items.)

7. Would you like your pet to receive a bath? ____ YES ____ NO (price determined by weight and coat length)
If requesting a bath, please try to pick up later in the day so that he/she has time to dry.

8. "Play Time" (additional exercise time, supervised play period, brushing) is available for \$5 per 15 minutes. Would you like playtime for your pet(s) while boarding? ____ YES ____ NO

9. *TLC Animal Hospital will use all reasonable precautions against illness or injury and efforts will be made to contact owners to advise of status. However, procedures and/or treatments will not be withheld if contact is not made. Payment is required when pet(s) are released or owner returns.*

10. Pets are released only during the hours of: Monday 7:30 am- 7:00 pm
Tuesday- Friday 7:30 am- 6 pm
Saturday 9 am- 2 pm
Sunday 5:00 pm- 5:30 pm

Signature: _____

Date: _____