21A Scott Way Bluffton, SC 29910 (843) 815-5898

Welcome to Bluffton Veterinary Hospital Boarding Form

The staff wishes to welcome you and your pet. We are here to make your pet feel as comfortable as possible while he/she is away from you. The following is a list of the services that we offer for your pet and requirements we have for your pet's protection.

- All dogs must be current on Rabies, Distemper, and Bordatella vaccinations. All cats and ferrets must be current on Rabies and Distemper vaccinations. For your convenience, we can vaccinate your pet during his/her stay with us.
- Your pet must be free of all internal and external parasites. If not, treatment will be provided at your expense.
- We can not be responsible for any damage done to personal items left with your pet.

Owner Name		Telephone		Out of Town Telephone			
Local Contact Person		Teleph	one	_			
Pet name		Boarding Dates:		Check In	Check Out	 ck Out	
Items Brought							
Feeding Instructions:							
Medication Instructions:							
Special Services Date you	would like	servio	es perform	ed			
Dr. Exam—————	\$53		Nail Trim &	Ear Clean	ing—	\$20	
Deluxe Bath (Includes full shampoo, moisturizer, ear flush, blow dry & comb out)	_\$33-\$48		Anal Gland	s Expresse	ed——	\$26	
Basic Bath-—	—— - \$22		Microchip-	-		\$55	

I understand that it may be necessary for me or my local contact person to pick up my pet if adverse weather should require evacuation of the hospital. It is further understood that an evacuation fee of \$200 per day will be charged in addi-

tion to the boarding fees if the pet is abandoned (not evacuated) and must be evacuated by the hospital staff.

Date

Owner's Signature