BOARDING REGISTRATION & CHECK-IN

(7a.m., 12p.m., 3-4p.m., and 5 or 7 p.m. depending on clinic closing hours). Bowls are cleaned daily and water is freshened in the a.m. and the p.m. We feed our guests Royal Canin prescription diets if you do not supply us with food. YOUR CAT'S DAY begins at 7 a.m. with a fresh change of litter, dishes and bedding. Litter is again cleaned in the evening, as well as the food dishes. Kitties are handled twice a day to ensure they are happy and content. We feed our guests Royal Canin prescription diets if you do not supply us with food. Would you like your dog to receive extra exercise in our backyard fenced in area? (\$8.00 per day – weather permitting.)

Yes

No Would you like your cat to receive brushing and extra handling? (\$5.00 per day) □ Yes □ No Would you like your pet to receive a bath while here? □ Yes □ No (Baths are complimentary after seven days of boarding, otherwise bathing prices vary by package.) Pets must be current on all vaccinations/tests or they Number Of Guests Staying with Us _____ will be administered during their stay. An exam fee (\$45.15) will be added if any vaccinations are needed. Cats/Names Dogs/Names **DOGS:** Heartworm Test (\$42.45), Fecal Exam (\$17.70), DHLPPC (\$32.95), Bordatella (\$22.30) and Rabies (\$28.30). *Any medications?* □ Yes □ No CATS: Leukemia Vaccine (\$24.00), Heartworm/Leukemia (Animal, Drug, Dosage) Test (\$49.30), FVRCP (\$20.85), Rabies (\$28.30) and a Fecal Exam (\$17.70). Proof of vaccines/tests @ another Vet □ Yes □ No Check-In Time/Date_____ **Authorization for Emergency Care** Check-Out Time/Date Should an emergency arise, I authorize the medical staff: The latest drop-off/pick up is one hour before the clinic 1) _____ Please do whatever necessary closes. Other arrangements are available if the client 2) Please do whatever necessary as long as cost pre-pays. There are no Sunday pick-ups or after hour stays under \$ pick-ups. Our regular clinic hours are listed below: *3)* Please call with estimate. Mon. Tues. Wed. Thu. Fri. Sat. An attempt will be made to reach you regardless of the 7am-7am-7am-7am-7am-7amoptions you initial. 6pm 6pm 5pm 6pm 5pm 1pm I hereby consent and authorize you, Dr. Pappas/Dr. Jones to receive, prescribe for, treat, or operate upon my pet/s named above. You are to use all reasonable precautions against injury, escape or destruction of the animal(s) above described, or otherwise in connection therewith, as is thoroughly understood that I assume all risks. Written notice will be mailed to the address on file to remove the animal(s). Five days after such written notice the animal(s) will be considered abandoned and may be disposed of, destroyed as you deem best, and it is understood that your doing so does not relieve me from paying all costs of your services and use of your hospital, including the cost of keeping. Signature Phone Emergency Number/Name ALL SERVICES MUST BE PAID FOR AT THE TIME OF DISCHARGE.

YOUR DOG'S DAY begins at 7 a.m. with a walk and potty break. Dogs are individually leash-walked four times a day