

AHCC BOARDING REPORT CARD

CLIENT: _____ **IN-DATE:** _____ **OUT-DATE:** _____
PHONE: _____ **EMERGENCY:** _____
PATIENT: _____ **BREED:** _____ **COLOR:** _____ **AGE:** _____
WEIGHT: _____ **# SEX:** _____ **ALLERGY:** _____ **ALERT:** _____
NOTES: _____

BATH	NAIL TRIM	EAR CLEANING	ANALS	SERVICES DUE DATE <treatments>
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EARS _____ EYES _____ SKIN _____ TEETH _____ PAWS _____ FLEAS _____ TICKS _____

BELONGINGS:

FOOD: _____ OWN FOOD _____

AMOUNT: _____ AM _____ PM _____

Medicine#1: _____

Directions: _____

Medicine#2: _____

Directions: _____

Medicine#3: _____

Directions: _____

DATE FEEDING EATING HABITS BM's

MO/DAY	AM/PM	GOOD/FAIR/POOR	AM/PM
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BOARDING RATES: UP TO 20# \$12.00
 21-45# \$13.00
 46-75# \$14.00
 OVER 75# \$15.00

ALL PETS MUST BE CURRENT ON THE FOLLOWING VACC
 DOGS: DALP-P, RABIES, BORDETELLA, FECAL
 CATS: RCPN, RABIES
 Failure to provide us with your dogs vaccination history at admission will result in us doing the vaccinations at the owner's expense.

Any pets with parasites will be treated at the owner's expense including fleas, ticks, lice, mites and internal parasites (worms).

Please label your pet's medication and provide written instructions for dosing. There is a \$2.00 per treatment charge for medicating your pet.

We discourage leaving any personal bedding or towels with your pet. A towel or blanket is provided. If you do leave their personal items we can't guarantee it's safe return.

Any Medical Problems that arise during your pets stay will be promptly attended to by AHCC professional staff. AHCC can't predict or be responsible for your pet's anxiety and activity level which can contribute to illness.

I assume full responsibility for expenses incurred from such illnesses. I authorize AHCC to humanely dispose of any pet as deemed necessary if I abandon her/him (If the pet is not discharged within 5 days of the expected date without my notifying AHCC of the change). I have read and fully understand the boarding policies and regulations.

Signature _____

Date _____