

HOLLYWOOD ANIMAL HOSPITAL, PA
Boarding Release Form

Client: _____ Pet: _____
Client ID: _____ Pet ID: _____

Date of Admission: _____ Expected Discharge Date: _____

Emergency Contact Information: Please provide number(s) where you can be reached, and an alternate representative in case you are unavailable.

Name: _____ Phone: _____ Phone: _____

Name: _____ Phone: _____ Phone: _____

Requirements for Boarding

- * All pets should be current on vaccinations, and have been vaccinated no less than 10 days prior to boarding.
Canine vaccines: Rabies; DA2PP, Bordatella
Feline vaccines: Rabies, FVRCP
- * All dogs are bathed prior to discharge. Bath post-boarding is \$22. This is complimentary for dogs that board for 7 nights or more.
- * Pets may only be discharged Monday through Saturday. **No discharges on Sundays or holidays.** Your pet will be ready to go home after 3pm.
Annex hours: 8:00am - 6:30pm
Hospital hours: 8:00am - 7:00pm
- * Pets requiring special attention during their stay (ex., diabetics, surgery, illness recovery pets, pets on SQ fluids and paralyzed pets) will be charged a med/post surgical fee, rather than a boarding fee.
- * Pets receiving medications will be charged \$4.80 daily, if the medication is provided by the owner. Medication dispensed by the hospital will be charged hospital medication fees.
- * All patients are provided bedding. The hospital does not accept responsibility for personal belongings.
- * All pets not picked up within 7 days from the expected discharge date will be considered abandoned.
- * If any internal/external parasites are found on the pet during their stay they will be treated and charged appropriately.
- * In the event you pet becomes ill during his/her stay, your pet will receive diagnostics and therapeutics deemed appropriate by the veterinarian caring for you pet, and charged appropriately. Every effort will be made to contact you prior to and during treatment.

Does/do your pet(s) have any medical condition(s)? Yes No

If yes, please list: _____

Will your pet(s) be taking any medication while boarding? Yes No

If yes, please list: _____

Did you bring your pet(s) own food, or is your pet on any special diet? Yes No

If yes, please list diet and feeding instructions: _____

If you are boarding more than one pet, do you want them boarded together? Yes No

I have read and understand the preceding guidelines. I accept full financial responsibility related to the treatment of my pet.

Owner's Signature _____

Date: _____