



## BOARDING CONSENT FORM

OWNER'S NAME: \_\_\_\_\_ TODAY'S DATE: \_\_\_\_\_

PETS NAME: \_\_\_\_\_ PICK-UP DATE: \_\_\_\_\_

ACCOMMODATIONS: \_\_\_\_\_

LIST ANY ADDITIONAL SERVICES NEEDED (Vaccinations, Grooming, Bathing, etc.)

1: \_\_\_\_\_ 2: \_\_\_\_\_

3: \_\_\_\_\_ 4: \_\_\_\_\_

MEDICATIONS (List each medication and dosage. Let us know if your pet has had today's dose.)

1: \_\_\_\_\_

2: \_\_\_\_\_

3: \_\_\_\_\_

4: \_\_\_\_\_

*There is an additional charge of \$2.95 to \$4.95 for each administration.*

DIET AND INSTRUCTIONS: \_\_\_\_\_

*There is an additional charge for prescription diet.*

ITEMS (LIMIT 2): \_\_\_\_\_

*We are not responsible for items left behind.*

*\*All pets must be up to date on all vaccinations. If vaccinations cannot be verified, the pet will be vaccinated upon admission.*

*\*Any pets with fleas and/or ticks at the time of admission will be treated at the owner's expense.*

I HAVE READ AND UNDERSTAND THE ABOVE. IF MY PET BECOMES SICK WHILE BOARDING I GIVE MEMPHIS ANIMAL CLINIC PERMISSION TO ADMINISTER THE NECESSARY TREATMENT AT MY EXPENSE.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

EMERGENCY NUMBER: \_\_\_\_\_ NAME: \_\_\_\_\_