

Boarding/Drop Off Form

Client's Name: _____ Email: _____

Phone number where you can be reached _____

Pet Information

Name of Pet _____

Dates of Boarding _____

Is your pet current on vaccinations including Kennel cough/Bordetella(required for boarding)_____

Would you like your pet bathed? **Yes or No** (small dog <20# \$20, 21-50# \$30, 50-75# \$40 75- Over \$60)
(For Dogs Only) **If Reservation is more than 4 days, your pet will receive a complimentary Bath. If you pick up before scheduled date, or during our peak boarding seasons there is no guarantee that your dog will get a bath. Bath's may be given at any time during your reservation.**

Would you like flea/tick treatment? Yes No (prices range \$16-\$55) your pet will be treated if fleas are seen.

Would you like your pet examined/treated for any health problems/concerns?

(Please list) **CHARGES WILL APPLY**

What medications is your pet being given if any? _____

_____ Has the medication been given today? **Yes or No**

Please include any personal items that are being left with your pet _____

Pick up times- Saturday 7:30am-noon, or 5-7 pm

Sunday 8-10am, or 5-7pm

Note- *Must ring doorbell when picking up*.

Payment: must be made up front when dropping off for boarding.

I, the undersigned owner or authorized agent of the above patient, authorize the doctors and staff of Eudora Animal Hospital to administer treatment or medical procedures necessary for the health of my pet. I assume financial responsibility for charges incurred, and agree to pay all the charges at time of release. I also understand that the hospital is not fully staffed 24 hours a day.

Authorized Agent/Owner _____ Date _____