

Sheeler Road Animal Hospital – Boarding Check-in Information

Required Vaccines: Dogs: Rabies, DHLPP-Parvo, Influenza, Bordetella (kennel cough). Cats: Rabies and FVRCP-C
Patients must be up to date on the above vaccinations according to AAHA guidelines. Vaccines must be administered by a licensed veterinarian. Bordetella must have been administered within the past 6 months.

Drop Off Date: _____ Pick Up Date: _____ A.M. P.M.

Pets can only be picked up during normal business hours- Mon-Fri 7:30am-5:30pm&Sat 8am-noon.

Owner's Name: _____ Pet's Name(s): _____

Authorized Person(s) to pick up your pet: _____

Emergency Contact Name: _____ Phone: _____

If possible, provide a number to reach you: _____

Email address (in applicable): _____

If dropping off multiple pets would you like them housed in a kennel/cage together: **Yes** **No**

I understand that pets in the kennel environment can behave differently than at home and accept complete responsibility should my pets have an altercation with each other while boarding. I understand that should an altercation happen my pets will be treated by our veterinarians and separated for the remainder of their stay. I assume financial responsibility for any additional charges related to my pet(s) treatment and additional boarding fees. _____
(initial here)

If time allows would you like your pet to be bathed or groomed before pick up: **Yes** **No**

If Grooming: Same as previous Use groomer's discretion Different from last time/1st time grooming

Phone number and best time for groomer to contact you if 1st time groom: _____

FEEDING INSTRUCTIONS: Dry Can Own Food 2x 1x AM or PM

Note: Some pets are reluctant to eat in new environments. If your pet is a reluctant eater do we have permission to use Enticements such as canned food, baby food or chicken? **Yes** **No**

Does your pet have any food allergies, if so please list: _____

Medical Condition(s) we should know about: _____

Special Instructions: _____

Medication(s): _____

Belongings: _____

Please Note: We take all reasonable care of personal items you leave with your pet; however, we cannot be held responsible for loss or damage.

***Does your pet suffer from anxiety due to thunderstorms or loud noises such as fireworks?** YES NO

***If yes, do you give permission to medicate your pet to aid with the condition while boarding?** YES NO

If your pet has fleas or ticks, your pet will be bathed and/or treated at your expense.

I understand the above conditions and also authorize any medical treatment required during boarding.

FOR OFFICE USE ONLY: _____

Signed

Date