

Hopewell Veterinary Hospital
640 Cedar Road, Jenkintown, PA 19046

Lifetime Boarding Release Authorization for:

Pet name: _____

Owner name: _____

Species (dog, cat, etc): _____

SEX : _____

BREED : _____

In case of illness or injury, I do hereby give my consent for Hopewell Veterinary Hospital to treat, prescribe for, or operate upon my pet(s) while they are being boarded. You are instructed to use all reasonable precautions against illness or escape of my pet(s), but you will not be held liable under any circumstances on account of the care, treatment or safekeeping of my pet(s) as it is thoroughly understood that I assume all risk, with regards to disease or injury, including those associated with aged pets. Should circumstances arise that my pet remain unclaimed after the date which I have stated as the pick-up date, I understand that written notice will be mailed. Thirty days after such written notice the pet(s) will be considered abandoned. It is further understood that such action will not relieve me of paying all cost of your service, including the cost of boarding.

I understand that Hopewell Veterinary Hospital does not allow personal items other than food or medication to be left with my pet. Hopewell Veterinary Hospital is not responsible for any items left with pets. For your pets safety, please do not leave any choker or prong collars on dogs.

I understand that should the information contained below change in any way it is my responsibility to notify Hopewell Veterinary Hospital.

Feeding Instructions _____

Medications _____

Special requests _____

Emergency contact/numbers _____

Signature of owner or responsible person

Date