

**ASHLAND TERRACE ANIMAL HOSPITAL, PC**

907 Ashland Terrace  
Chattanooga, TN 37415  
423-877-4576

*George W. Scorey, D.V.M. – Katherine A. Thigpin, D.V.M. – Lynne F. Madonia, D.V.M. – Kathleen Wohlers, D.V.M.*

**BOARDING FORM**

**Any patients** with meds will have a daily administering meds fee at a cost of \$3.00 per day.

Today's date: \_\_\_\_\_ Check out date: \_\_\_\_\_ Time: \_\_\_\_\_

Person to contact in case of emergency: \_\_\_\_\_ Phone # : \_\_\_\_\_

**Pet #1**

**Date Vaccines Given**

Rabies :

DHLPP/FVRCCP:

Kennel Cough:

Are there any medications to be given? YES NO

1. \_\_\_\_\_ NEXT DOSE DUE: \_\_\_\_\_

2. \_\_\_\_\_ NEXT DOSE DUE: \_\_\_\_\_

3. \_\_\_\_\_ NEXT DOSE DUE: \_\_\_\_\_

Bath before going home? YES NO

**Pet #2**

**Date Vaccines Given**

Rabies :

DHLPP/FVRCCP:

Kennel Cough:

Are there any medications to be given? YES NO

1. \_\_\_\_\_ NEXT DOSE DUE: \_\_\_\_\_

2. \_\_\_\_\_ NEXT DOSE DUE: \_\_\_\_\_

3. \_\_\_\_\_ NEXT DOSE DUE: \_\_\_\_\_

Bath before going home? YES NO

I authorize Ashland Terrace Animal Hospital to do whatever necessary should an emergency arise, such such as laboratory testing, x-ray, or surgery. If tranquilization is necessary for treatment, handling or bathing, I give my permission to administer such medications.

**Pets are to be released only during regular office hours.**

\_\_\_\_\_  
ATAH Representative Admitting

\_\_\_\_\_  
Client Signature