

Rocky Hill Animal Hospital Boarding Sheet

Owner: _____ Pet(s) Name: _____
Owner's Phone #: _____ Check In Date: _____ Check Out: _____
Emergency Contact: _____ Emergency Phone #: _____

1. Would you like your pet examined by a Veterinarian while boarding? If so, why:

2. Please describe any bedding, towels, toys, etc. to be left with your pet:

3. Would you like for your pet to have any of the following before going home?

Bath ___ Nail Trim ___ Anal Glands ___ Groom ___ Special Shampoo _____

4. Did you bring your own food with you? Yes No

How many times a day do you feed your pet? _____ How much? _____

5. Please list the names and dosage of any medication your pet will need while boarding.

*All patients must be up to date on vaccinations and a copy of records must be present before boarding. Client is responsible for getting previous vaccination records to Rocky Hill Animal Hospital before bringing a pet for boarding, grooming, etc. If records are not up to date and received by drop off, vaccines will be given. In addition, any animal found having fleas or evidence of a flea infestation will be given Capstar—a safe, proven flea control medication—to protect our clinic and other patrons for the cost of \$4.50 (under 25lbs) or \$5.00 (over 25lbs).

* *Bordetella* is required at Rocky Hill Animal Hospital every 6 MONTHS.

Boarding Extra's (15 minutes each)

Extra Play Time (\$5 each) ___ Qty ___ Cuddle Time (\$5 each) ___ Qty ___

Play Yard (\$5 each) ___ Qty ___ 10 Minute Brush Time (\$5 each) ___ Qty ___

I, hereby, authorize the veterinarian(s) at Rocky Hill Animal Hospital to treat my pet as deemed necessary while boarding.

Signature: _____ Date: _____