



# Allen Veterinary Centre

1021 W. McDermott Dr. Allen, TX 75013

## BOARDING/HOSPITALIZATION CONSENT FORM

Owner Information:	Pet Information:
Name: _____	Name: _____
Emergency Contact Number: _____	Species: <input type="checkbox"/> Canine <input type="checkbox"/> Feline
	Description/color: _____

### Boarding Policies:

All hospitalized or boarding animals must have written proof of current vaccinations. If no proof is given, vaccinations will be given at the owner's expense. All animals will be checked for **fleas and ticks**. If any are found, the problem will be treated appropriately at the owner's expense.

- **Dogs** must be current on **RABIES, DA2P (Distemper), PARVO AND BODETELLA (Kennel Cough)**.
- **Cats** must be current on **RABIES and FVRCP-C (Feline Distemper)**.

### Boarding Information:

Animal drop-off and pick up only during office hours. We ask that pets being dropped off Monday through Friday drop off no later than 5:30 pm and no earlier than 8:00 am. For Saturday drop off and pick up, please no later than 11:30 AM. This assures that all pets dropped off can get settled and taken care of before we leave and also makes space available for pets coming in to board for that day.

Dogs are walked outside 2-3 times daily and every effort is made to keep runs and cages clean. However, sometimes a pet becomes soiled. If this should occur, the animal will be bathed at the owner's expense. This is in the best interest of both you and your pet.

**Check in Date:** \_\_\_\_\_ **Check Out Date:** \_\_\_\_\_

Approximate pick up time:  Morning (8 am-12pm)  
 Afternoon\* (12pm-6pm) \* Monday-Friday only

**Requested Cage Size\*** \_\_\_\_\_

\*AVC reserves the right to move your pet to a different size cage during peak boarding times in order to accommodate additional boarding guests. Adjustments will be made to your boarding charges if this should occur.

### Feeding:

Did you bring your pet's own food?  **Yes**    **No\***

\*If your pet will not eat his/her regular diet, we will add canned food in order to entice your pet to eat. Any additional food added will be charged to the owners account upon check out.

Food Name: \_\_\_\_\_

Amount: \_\_\_\_\_ How often?  **Once/day**    **Twice/day**

Do you want your pet fed the day of check out?  **Yes**    **No**

**Bathing Services:**

Would you like your pet bathed prior to check out? (Nail trim & anal gland expression is not included)  **Yes\***  **No**

Would you like your pet to receive a nail trim prior to check out?  **Yes**  **No**

\*If your pet is bathed on the scheduled check out date, afternoon only pick-up time is available. Saturday bathing is not available.

**Personal Items Information:**

Toys and bedding may be left with boarders. Please be sure to label your pet's belongings. All bedding must be washable. *Allen Veterinary Centre is not responsible for lost or damaged articles.*

**Please list your pet's belongings:**

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**Medication Administration:** Does your pet need medication administered during his/her stay?  **Yes\***  **No**

Medication administration will be charged each time it is administered. If your pet has multiple medications given at one time, only one charge will be assessed for the group of medication given. Our staff is dedicated to making sure that your pet receives the proper medication at the proper time.

\*If answered yes to above, indicate the name of the medication, amount to be given, and frequency of administration:

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**Medical Information:** Does your pet need any veterinary medical services during his/her stay (i.e. wellness examination, vaccinations, check skin/ears, dental, surgery, etc)?  **Yes\***  **No**

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**\*If yes, BEFORE you leave please discuss any issues with a technician.**

Dogs often suffer from diarrhea while boarding. Stress is often the cause, but we have also diagnosed infectious causes like parasites and bacterial overgrowth. To ensure all boarders remain healthy, we will test the stool and treat ALL dogs with diarrhea at the owner's expense.

Do you want to be notified if your dog gets diarrhea?  **Yes\*** \_\_\_\_\_  **No**

**\*If diarrhea occurs over the weekend, you will be notified on the first business day.**

**Release:**

I hereby consent and authorize you to prescribe, treat, or operate in my absence. You are to use all reasonable precautions against injury, escape or destruction. Neither you nor your staff will be held liable or responsible in any manner or under any circumstances on account of care, treatment, or safekeeping as it is understood that I assume all risks. I assume financial responsibility for all charges incurred on behalf of my pet and agree to pay all such charges at the time of release of same. I hereby certify that I have and understand the authorization.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_