

**Cottonwood Animal Hospital  
Boarding Consent Form**

Will be staying from \_\_\_\_\_ to \_\_\_\_\_

**Bath: Yes / No**

Approximate pick up time is \_\_\_\_\_ AM/PM

**External Parasites**

Every pet upon arrival to our facility will have a complimentary exam to ensure their health. If your pet has any fleas, ticks or internal parasites we will treat them with the appropriate medication and charges will be incurred to the client appropriately (Average Cost \$25.00 - \$35.00). This is to protect your pet and other pets staying with us.

**Vaccine History: We require a paper copy of vaccines and parasite test prior to boarding. If you do not have a current copy of vaccines, we will vaccinate your pet as required by our hospital protocol.**

**Canine (Check if to be done during stay)**

- |                          |  |         |
|--------------------------|--|---------|
| <input type="checkbox"/> | Rabies <b>(Required)</b>                   | \$17.50 |
| <input type="checkbox"/> | Kennel Cough <b>(Required)</b>             | \$20.50 |
| <input type="checkbox"/> | Distemper/Parvo/Lepto <b>(Required)</b>    | \$33.50 |
| <input type="checkbox"/> | Lyme (Optional)                            | \$31.00 |
| <input type="checkbox"/> | Intestinal Parasite Test <b>(Required)</b> | \$17.50 |

**Feline (Check if to be done during stay)**

- |                          |  |         |
|--------------------------|--|---------|
| <input type="checkbox"/> | Rabies <b>(Required)</b>                   | \$17.50 |
| <input type="checkbox"/> | FVRCP <b>(Required)</b>                    | \$21.00 |
| <input type="checkbox"/> | FVRCP+FeLV (Optional)                      | \$33.50 |
| <input type="checkbox"/> | FIV (Optional)                             | \$20.00 |
| <input type="checkbox"/> | Intestinal Parasite Test <b>(Required)</b> | \$17.50 |

\*If your pet tests positive for internal parasites, medication will be dispensed at the owner's expense\*

**Heartworm Testing –**

- Your pet is due for a **Heartworm Test**. This test is necessary in order for Heartworm Prevention to be dispensed.  
 **Owner Approves Heartworm Test**       **Owner Declines Heartworm Test** \$34.00

**Feeding**

Did you bring food/treats for your pet? **YES** or **NO** (We serve Science Diet)

Feeding/Treat instructions \_\_\_\_\_

**Medications**

Did you bring Necessary Medications? **YES** or **NO**

If **yes**, please tell your receptionist. **Has your pet had any of these medications today?** **YES** or **NO**

Medication Instructions \_\_\_\_\_

**Do you need any Medication Refills:** **YES** or **NO**

**Do you need a refill of Heartworm Prevention?** **YES** or **NO**

**Do you need a refill of Flea & Tick Prevention?** **YES** or **NO**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Toe Nails Trimmed \$10.00 | <input type="checkbox"/> Anal Gland Expression \$17.50 | <input type="checkbox"/> Boarding Exam \$0.00 |
|--|--|---|

\*In case of illness, Cottonwood Animal Hospital will attempt to contact owner/emergency contact. If unable to make contact, I authorize Cottonwood Animal Hospital to treat my pet while under their care.

**\*Boarding is charged \$16.00 PER DAY. You will be charged for the day you drop off as well as the day you pick up your pet. For example: If you drop your pet off on Friday and pick them up on Monday then that is a 4 day stay. You will be charged accordingly for 4 days of boarding.**

\_\_\_\_\_

Owner Signature and Phone Number

\_\_\_\_\_

Emergency Contact and Phone Number