Liverpool Village Animal Hospital Boarding Agreement

Pet Name: _____ Owner's Name: _____ Telephone: _____

Date of drop off:_____ Date of pick up: _____

Special requests:

Physical exam	Y	N	_____
Physical exam w/Vaccinations	Y	N	_____
Nails	Y	N	_____
Bath	Y	N	_____
Other:			_____

Diet/Feeding Instructions (how many cups + how often):_____

Treats (how many per day):_____ Already fed today? Y N

Medication Requirements:_____ Already had today? Y N

Belongings:		Checked IN	OUT
Bed / Blanket	_____	❑	❑
Toys	_____	❑	❑
Chewies / Bones	_____	❑	❑
Treats	_____	❑	❑
Leash / Collar	_____	❑	❑
Pet Carrier	_____	❑	❑

A complimentary bath is given to all dogs staying more than 3 days. We reserve the right to APPLY and CHARGE for flea control as needed. This is not only for your pet's health but also for that of all others in this hospital.

*** In the course of your pets stay here they may chew or soil their bedding. Please be aware that in the event of an accident, we will wash any beds or blankets as necessary. We, however, are not responsible for their destruction in the wash or by the pet.

The pet will not be discharged to any person other than the owner or the individuals listed below.

I understand that during the boarding, unforeseen conditions may be revealed that necessitate additional procedures other than those set forth above:

❑ I consent to and authorize such procedure(s) as are necessary in the exercise of the veterinarian's professional judgment.

❑ Try to contact me before performing additional treatments, but in the event that I cannot be contacted, proceed as necessary in the veterinarian's professional judgment.

I have read and understand this authorization and consent.

Owner (or Agent) Signature: _____Date:_____

Contact #_____