

ALL CREATURES ANIMAL CLINIC
BOARDING AGREEMENT

	Date	Time	Weight
Drop Off			
Pick UP			

Owner: _____

Pet: _____

Emergency Contact Info:
(How to contact owner in case of emergency)

List any items you are leaving with your pet:(You are welcome to leave bedding, toys, treats, or food for your pet. However, some items may become separated from your pet during routine daily cleaning of kennels and become part of our revolving inventory. (Please label your pets belongings)

Feeding/Medicating Instructions: Do you feed your pet **once** or **twice** daily? (Include detailed instructions for medications, special feeding instructions, or anything you would like the doctor to check)

VACCINATION POLICY

To insure the protection of all pets under our care, the following vaccines must be current
DOGS: Rabies, DHLPPV, Bordetella CATS: Rabies, FVRCP
If these vaccines are not current or you are unable to provide written proof of vaccination, then the required vaccinations will be administered upon drop off for boarding at owner's expense.

Our records indicate your pet is due for: DHLPPV____, FVRCP____
Bordetella____, Rabies____

MEDICAL ILLNESS/EMERGENCY POLICY

One advantage of boarding your pet(s) at a veterinary clinic is that medical attention is readily available should the need arise. If your pet becomes ill while boarding, we will contact you by the emergency number you listed above regarding your pet's symptoms, treatment options and estimate of additional costs. If we are unable to reach you, then treatment will be initiated by the attending veterinarian and continued efforts will be made to reach you. The pet owner assumes responsibility for cost of treatment provided for their pet while boarding.

First time boarders or pets staying longer than 10 days, may require a deposit equal to one-half the estimated boarding fees.

I have read and understand the boarding policies of All Creatures Animal Clinic and agree to their terms.

Signature

Date