GUEST REGISTRATION

			Date:	
Full Name:		Patient Name:		
		Cracica		
		Breed:		
{		Sex:	Sex:	
		Color:		
	BOARDING IN	STRUCTIONS/SPECIAL NEE	DS	
Would you like y	our pet bathed before goi	ing home? Yes No	D	
Would you like y	your pet (for an additional	fee) to have extra PLAY TIM	IE OFF LEASH?	
\$10 per session	, weather permitting: (Avai	ilable weekdays only) Yes	Notimes/day	
Emergency cont	act/number			
Pet's Belongings	(carriers, toys, etc.)			
I feed my pet (ple	ase circle) once daily (am c	or pm) twice daily free choid	ce canned dry mixed	
Was my pet's d	iet brought from home? ነ	res No If yes, what kine	d?	
Are medications necessary while boarding? Yes No (There is a charge of \$11.00 per day)				
List names of m	edications and the dosage	to be given		
Services Requeste				
Bath	Flea Treatment	Nail Trim	Grooming	
	Vaccinations	Heartworm Test	Stool Check	
Other				
	GENERAL BOARD	ING CONDITIONS and INFORI	MATION	

In order to protect your pet, all guests will be examined at admission and external parasites will be treated. All guests must be current on vaccinations, including Bordetella for dogs and cats. Proof of vaccination is required. Parasite treatments and overdue vaccines will be administered at the owner's expense.

MEDICAL ILLNESS POLICY

One of the advantages of boarding your pet(s) at a veterinary hospital is that medical attention is readily available should the need be. If your pet becomes ill, we will call the emergency number regarding your pet's symptoms, treatment options, and estimate of additional costs. If no one can be reached, however, please indicate your wishes below should your pet require treatment to relieve immediate discomfort or to resolve an important medical condition.

Please perform whatever services the doctor deems necessary for the best care of my pet.

_____I authorize up to \$______in medical care for my pet until someone can be reached.

Do not administer any medical treatment until specific authorization is given.

I have read and understand the agreement. I fully intend to pick up my pet on the above specified date. If circumstances change, I will notify the office of a new pick-up date.

Boarders will only be released during normal business hours; no exceptions.

____We cannot be held responsible for belongings of monetary or sentimental value.

Signature:_____

_Date:_____