



East Maryland Animal Hospital  
529 East Maryland Avenue  
Phoenix, AZ 85012  
602-279-7366  
[www.EastMarylandAH.com](http://www.EastMarylandAH.com)

### Boarding Consent Form

Dates Boarding: \_\_\_\_\_

Client Name: <first-name> <last-name> Patient Name: <animal> Account: <number>

1. Feeding Instructions: \_\_\_\_\_

If no specific instructions given, pet will be fed our sensitive stomach dry food twice daily.

#### Medications while boarding

2. Medication	Strength	Directions

3. When should we start medications? \_\_\_\_\_

**\*\*MEDICATION IS ADMINISTERED AT AN ADDITIONAL DAILY FEE\*\***

**For the safety of all boarders, all pets must be current on vaccinations, including Bordetella (dogs must have this every 6 months) to board. If these are administered elsewhere, we require written proof of vaccinations.**

**Please notify us if you would like any additional services such as SPA Packages, Baths, Nail Trims, etc. while your pet is boarding.**

#### On Call Doctor Services for Boarding Pets

We are excited to have the opportunity to take care of your pet in the following days. We are pleased to offer the exclusive service of providing close monitoring by our veterinary staff of your pet while they are under our care, including a doctor on-call service every day of the week, including all holidays, if any unexpected medical issues arise.

We will ALWAYS attempt to contact you first before initiating any medication or treatment, unless we have spoken with you about it ahead of time or it is a life-threatening event. In most cases we will hold off on treatments until we reach you, unless the comfort or critical health of the pet is in immediate danger, or you inform us otherwise.

The cost of the on-call doctor coming in to examine and address the medical needs of your pet would be \$69.95 for a Boarding Urgent Care Exam. Any medical treatments performed or medications given in addition to the exam would also be explained over the phone to you or the emergency contact. You are responsible for the costs of the veterinary care and treatment if a medical ailment of your pet occurs while staying with us. We hope this provides you with comfort that your pet is in good hands if any unforeseen issue occurs while you are away. This is a great benefit of boarding your pet at a veterinary clinic instead of a general boarding facility. Please always let us know if your contact information (or your emergency contact) changes during your pet's stay with us.



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### Additional Boarding Information

#### 4. FOR MULTIPLE PETS:

I would like my pets boarded in the *SAME* kennel \_\_\_\_\_

I would like my pets boarded in *SEPARATE* kennels \_\_\_\_\_

#### 5. Flea and Tick Preventative

To protect your pet(s) against fleas and ticks while boarding, Frontline Plus will be applied to your pet on the day they check-in. Frontline Plus is good for 1 month. There is a charge of **\$25.20** each time Frontline Plus is applied. *Initial* below to give East Maryland Animal Hospital permission to apply Frontline as needed during this 6 month period.

**Initial:** \_\_\_\_\_

**OR**

If you already apply a flea and tick preventative at home on a regular basis, please *initial* after the following statement:

I apply a Flea and Tick preventative to my pet(s) once a month. If fleas and/or ticks are found on my pet at pick up I will not hold East Maryland Animal Hospital responsible.

**Initial:** \_\_\_\_\_

**Our Hospital DOES NOT provide 24 hour observation by regular personal. We do not have staff on site 24 hours a day. Holiday and weekend hours for the boarding staff are 7am-11am and 4pm-7pm.**

**Client's Initials** \_\_\_\_\_

*Because we want to give your pet the best care possible while boarding with us, if any unforeseen problems arise while your pet is in our care, we will examine and treat your pet as we see fit.*

I hereby give permission for East Maryland Animal Hospital to board my pet. I understand I am financially responsible for the services described. I understand that in rare instances it may become necessary for my pet to receive emergency or non emergency care. Every attempt will be made to contact me. In the event I am unable to be reached, I GIVE PERMISSION FOR THE APPROPRIATE CARE.

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

**Print name:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**\*\*Note: Because of Insurance/liability reasons we CANNOT release pets outside of our business hours. If it's after 2:00pm on Saturday, you CANNOT pick up until Monday at 7:00 am. If it is after 6:00pm Mon-Fri you CANNOT pick up until the following day.\*\***