



Boarding Authorization Form

Owners Name: _____ Pets Name: _____

Canine Description of your Pet: _____
Feline

Please Read and Fill this form out *completely* then bring the form with you when you bring in your pet for boarding.

Emergency Telephone number we can reach you at: _____
Date of drop off: _____ Date of pick-up: _____

Eating Plan: Kennel Food Owner's Food
How much food do you feed (cups/can)? _____
 Once Daily am or pm (circle one)
 Twice Daily
 Other: _____

Is your pet on any medications? Yes or No (circle one)

If yes, please list the names of all medications and their instructions:

Special Instructions (include treatments, procedures or care giving requests):

- + We strongly DISCOURAGE leaving pet beds, toys, or personal items while boarding. We provide comfortable bedding for your pet while they are staying with us. We will not be responsible for any items left with your pet
- + If your pet has fleas noted while in the kennel, he/she will be treated for fleas, at the owners cost, with Frontline Plus.. This is for the health and safety of all the pets in our facility.
- + All pets boarding must be current on vaccines according to our records or owners must provide proof of vaccines done elsewhere. If your pet is not current on vaccines, they will be vaccinated for their safety and the safety of all our patients.
- + In case of illness (example: diarrhea, vomiting, coughing, etc) or injury, I the undersigned, do hereby give my consent for the doctors of the Danvers Animal Hospital to treat or prescribe for my pet(s) while they are being boarded at the hospital.

Signature of Owner or Representative of Owner _____ Date _____

Official use only: Did your pet eat today? Yes or No
Did your pet have his/her medication(s) today? Yes or No