

Poquoson Veterinary Hospital

483 Wythe Creek Road Poquoson, Virginia 23662 (757) 868-8532

♦ DR. JEAN EDDY ◆ DR. BRITTANY B. ASHWORTH ◆
♦ DR. MATT WILLIAMS ◆ DR. ROSALIE L. GIBSON ◆

BOARDING POLICY

Owners' Name	Pet's Name(s)	Pick Up Date
If you are bringing multiple pets, an	re they able to () sleep together, () play tog	gether, or () be fed together?
	Boarding is available to healthy, ful	ly vaccinated pets.
Which flea preventative is your petAdvantageAdvantageAdvantage	currently using? ntixNexgardOtherNone	treatment will be administered at the owner's expenseNo/Date Applied
-	is your pet currently using? rtgardRevolutionOtherNo form preventative while boarding? Yes/Date to	
recommend a bath the morning of	discharge. Prices are determined by the size o pet before discharge. Pick-up is after 3:00PM.	of pets may be messy while boarding. For this reason we f your pet.
per day will be charged for adminis		antity, and times per day they are given. A fee of \$2.50
Drug/Food	Amount to be given	<u>Times per day</u>

5.) Boarding fees must be paid in full on the day of pick-up. New clients boarding pets are required to pay a deposit of one half of the entire cost. **PETS ARE RELEASED TO OWNERS ONLY,** unless prior arrangements are made. Who is authorized to pick up your pets?______

6.) While your pet is in our care, it is important for us to have first-hand knowledge of any medical conditions that may be present. To ensure that we may monitor and care for your pet appropriately, we require a comprehensive physical examination be performed by <u>one of our veterinarians</u> within the last year. If one of our doctors has not performed a full physical exam on your pet within the past year, one will be performed at your expense. If any medical problem is observed or develops, please let us know how you would like us to treat your pet by checking one of the following:

() Please treat as required. You need not call me.

() Notify me for permission to begin non-emergency treatments.

*Note: If we are unable to contact you, Poquoson Veterinary Hospital has the authority to proceed with any veterinary medical services deemed necessary for the safety of the pet at the owner's expense.

7.) If you are leaving any personal items with your pet today, please fill out the back of this form.

Owner/Agent Signature	Date:	
Emergency Phone	Other Phone:	

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Personal Items for Boarding Patients

Your pet having his/her personal belongings (toys, treats, blankets) while boarding is important to Poquoson Veterinary Hospital and your family pet. Being away from the family is not always easy on our four-legged friends and having a touch of home with them can be comforting. However, there are special considerations to make when your pet is boarding. While your pet may have a special bed, blanket or toy that he would never chew up at home, he may decide to chew it up while in a kennel away from home. We ask that no irreplaceable/meaningful/non-washable items be left with your pet while he stays with us.

Please read and sign the following waiver when leaving any personal items for your pet:

- I will label ALL personal items with my pet's first and last name using a permanent marker.
- I understand that Poquoson Veterinary Hospital is not responsible for loss or damage to personal items left with my pet, including collars and leashes. I understand that personal items may not be returned in the same condition in which they were left and some personal items may be damaged to the point of being discarded.
- I understand that I am not to leave any irreplaceable or non-washable items.
- I understand that leaving personal items with my pet could pose a serious health risk if (s)he were to ingest them. I also understand that even some treats can potentially pose a health risk if they are ingested without chewing properly. This could lead to an emergency situation and I will not hold Poquoson Veterinary Hospital liable for any of the damage or costs associated with treatment.
- I understand that the veterinarians have the right to withhold any personal items from my pet if they foresee a health risk.

List of all personal items left for boarding:

Name:	_
Signature:	_
Date:	_
Witness:	