



Annual Boarding Agreement

Owner's Name: <first-name> <last-name>

Client # <number>

Pet's Name:

Vaccines:

In order to board your pet, his rabies vaccine must have been given within the last twelve months if he is less than two years of age or in the last thirty-six months if pet is over two years of age. DA2PP/FVRCP and Bordetella vaccines must have been administered within the last twelve months, unless you can show that your veterinarian follows an alternative immunization protocol. If your pet does not receive his vaccines at this facility, you must show documentation that verifies current vaccinations by a veterinarian. If any vaccinations are past due, your pet must be vaccinated before boarding for his protection. Vaccines administered at this facility will be added to your invoice.

Diet:

We will feed your pet Hills Adult Sensitive Formula twice a day. We will be pleased to feed a prescription diet or another commercial diet of your choice if you bring it with you. Please clearly mark any food with your pet's name and detailed feeding instructions.

Medication:

If your pet will be receiving medications during his stay, it must be in the original veterinary-labeled container with instructions for administration and your veterinarian's phone number. A medication administration fee will be charged.

Statement of Kennel Policy:

1. Boarding charges accrue for each night your pet stays with us
2. Pets must be picked up between 7:30am and 6:00pm Monday-Friday or between 7:30am and 12:00pm on Saturdays. Discharges after hours are not allowed. A courtesy Sunday pick-up can be arranged at time of reservation or at least 48 hours in advance. Under no circumstances are any other services offered during Sunday pick-up times. Monday is our standard pick-up time for weekend boarding and standard rates apply. All boarding and scheduled medical services must be paid in full at time of check in for Sunday pickup and any additional charges that occur will be billed to the owner.
3. We do not recommend leaving any personal items, however, any personal items may be left at your own risk. We are not responsible for loss or damage.
4. We cannot guarantee the health of any animal, but pledges to give appropriate care to all boarded pets. I hold this facility harmless for conditions that often are unavoidable in boarding environments, including, but not limited to, weight loss, rough hair coat, kennel cough, upper respiratory infection, diarrhea, and fleas.
5. Should the pets identified on this record become ill, Oldtown Veterinary Hospital will provide all medical/surgical treatment it deems necessary, with fees not to exceed \$ _____. I acknowledge that in the event of my pet's illness, the staff at this veterinary facility may not be able to contact me immediately and is therefore authorized to initiate appropriate treatment until I (or the pet's agent) can be reached. I agree to pay all related expenses associated with the treatment of my pet until I am available to discuss further care and fees with the attending veterinarian.
6. Any pet found to have fleas or ticks will be treated at the owner's expense.

<animal> <last-name>

I agree to make complete payment at the time of discharge. I certify that my pet appears to be free of contagious disease and has not bitten anyone within the past ten days. I understand that if I fail to pick up my pet within ten days of notification to the above address, my pet will be considered to be abandoned and will be handled in accordance with state law, and that doing so does not relieve me of my financial obligations.

I have read the above and I am in full agreement.

Signature of Owner or Agent _____ Date _____