

Boarding Release Form

Client:
Patient:
Would you like your pet to be bathed before going home?:
Admission date:
Go home date:
Medications/Supplements:
Feeding Instructions:

In leaving my pet for care and boarding at Waterford Lakes Animal Hospital (WLAH), I am aware that certain medical problems may arise during his/her stay. Understanding this, I give my permission to the doctors and staff of WLAH to treat my pet as deemed necessary. I also understand that if treatment is necessary, I will be responsible for any charges at the time of my pet's discharge.

___ I understand that WLAH has taken every precaution to prevent flea/tick infestation and any fleas or ticks noted upon an entry cleanliness check will result in appropriate charges to treat the fleas/ticks. In the event of severe tick infestation charges may include a technician tick removal charge of \$19.75 per 15 minutes, non-groomer body shave of \$50.00, and any necessary flea and tick medicine. Severe tick infestations are also subject to revocation of boarding privilege.

___ I understand that my pet's diet and environment vary while being boarded and vomiting and diarrhea may develop. In the event this occurs a doctor's physical exam will be done to ensure the health of my pet. In diarrhea cases a fecal exam also must be performed to ensure that the diarrhea is not of a contagious nature. The fees associated with this are \$41.00 for a fecal flotation/direct microscopic examination and \$52.00 exam charge, and the cost of the medication used to treat the condition found.

___ I understand there is a fee to dispense medications to my pet. This fee applies to one medicine given once daily up to four medicines given twice daily. There is an additional fee for more than four medicines or multiple ophthalmic treatments. A different fee applies to diabetic boarders.

___ I understand that occasionally boarded animals lose their appetite and may experience minor weight loss while being boarded.

In case of a medical emergency, WLAH will make every attempt to contact you or a responsible party, but will always proceed in the best interest and health of your pet.

Should circumstances necessitate leaving my pet past the agreed upon date of departure, I will call WLAH, notify them of the delay and give them an updated departure date. Failure to call within 10 days of the original departure date may result in my pet being considered abandoned.

Emergency phone number _____

Signature of Pet Owner or Person Responsible _____ Date _____

Waterford Lakes Animal Hospital
Email: waterfordlakesvet@cfl.rr.com
Phone: (407) 382-3818
Address: 11951 Lake Underhill Rd.,
Orlando, FL, 32825