

## Ruskin Animal Hospital BOARDING FORM

Our Mission at Ruskin Animal Hospital is to provide your family member a happy and playful vacation atmosphere in a safe, clean, and healthy environment. For the safety of your pet we do not allow campers to have any treats that could cause an obstruction. All campers must be up to date on vaccines and flea/tick preventatives. If your pet is found to have any parasites such as fleas or intestinal worms they will need to be treated for the safety of themselves and the other boarders. We will contact if this occurs so that you are informed. All campers staying 7 days or more will get a complimentary bath.

### Owner/Patient Information

**Owner's Name** \_\_\_\_\_ **Contact number(s)** \_\_\_\_\_

If questions regarding your pet's care/treatment arise we will always make an effort to contact you in order to discuss a course of action. We will always use our best judgment to safeguard the health of your pet and others boarding.

**Boarder Name:** \_\_\_\_\_ **Prepared By** \_\_\_\_\_

<b><u>Canines:</u></b>	<b><u>Date Given:</u></b>	<b><u>Felines:</u></b>	<b><u>Date Given:</u></b>
Rabies 1yr 3yr	_____	Rabies 1yr 3y	_____
DA2PP	_____	FVRCP	_____
Influenza (H3N8)	_____	FeLeuk	_____
Influenza (H3N2)	_____	Exam	_____
Bordetella	_____		
Lepto	_____		
Fecal	_____		
Exam	_____		
HW Test	_____		

**Reviewed By** \_\_\_\_\_

### **Flea Prevention**

\_\_\_ Activyl, Frontline, Nexgard, Vectra, Revolution, Advantage, Comfortis or Trifexis has been applied/given in the last 30 days.

\_\_\_ Apply Activyl/Vectra, or (\_\_\_\_\_)

Please circle additional services: Bath   Nails   Anals   Clean Ears   Exam

### **Feeding Instructions**

Type/Quantity of Food: \_\_\_\_\_

Frequency (circle one)      Free feed      Once a day      Twice a day

Type/Quantity of Food: \_\_\_\_\_

Frequency (circle one)      Free feed      Once a day      Twice a day

### **Medications (\$1.25 PER medication administration)/Other:**

Medication Name: \_\_\_\_\_ Dose: \_\_\_\_\_ Frequency: \_\_\_\_\_

Medication Name: \_\_\_\_\_ Dose: \_\_\_\_\_ Frequency: \_\_\_\_\_

Other: \_\_\_\_\_

### **AN ACCURATE AND COMPLETE HISTORY IS KEY TO TREATING YOUR PET**

Current/Previous Medical Issues

Check all that apply.

___ Lethargic	___ Diarrhea	___ Limping
___ Seizures	___ Anxiety to thunderstorms, noise, etc	___ Vomiting
___ Vaccine reactions	___ Drinking excessively	___ Hairballs
___ Urinating excessively		___ Diabetes
___ Obstructions (ingesting foreign objects)		
___ Other: _____		

If you checked any of the issues above please provide the length of time these symptoms/conditions have persisted?

\_\_\_\_\_

Please list any medications your pet is currently taking (including heartworm and flea prevention):

\_\_\_\_\_

**Ruskin Animal Hospital**  
**BOARDING FORM**

Boarder Name: \_\_\_\_\_

Please circle appropriate accommodations

Cats                      CONDO                      REGULAR

Types: For Dogs, please note there is a 40lb weight limit in the Junior, however in special circumstances, such as a dog with super jumping abilities we might need to change requirements for accommodations.

Junior Accommodations                      (3 feet X 5 feet)

Large Accommodations                      (3 feet X 8 feet)

\*\* VIP Suite                      (6 feet X 9 feet) w/web cam\*\*

My pet came to camp with the following items that will go home with my pet at pick up:

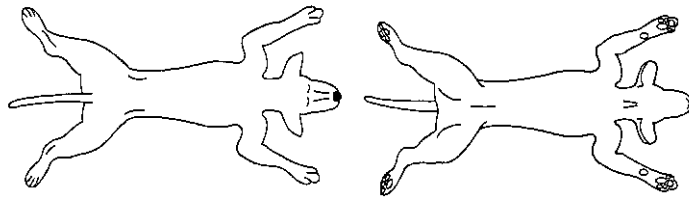
<b>Item:</b>	<b>Description:</b>
_____	_____
_____	_____
_____	_____

If the hospital cannot reach me at my emergency number, or reach my emergency contact within 15 minutes, I authorize Ruskin Animal Hospital to treat as necessary in case of illness or an emergency situation. This includes both treatment and humane euthanasia at the doctor's discretion.        I understand that full payment is due when I pick up my pet for all services.

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

**Emergency contact name:** \_\_\_\_\_ **Emergency number** \_\_\_\_\_

\*It is important to provide a number that you can be contacted in case of an emergency or illness\*



**Pet Weight** \_\_\_\_\_