



Poquoson Veterinary Hospital

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

Dr. Jean B. Eddy ♦ Dr. Brittany B. Ashworth
Dr. Matt Williams ♦ Dr. Rosalie L. Gibson

EXOTICS BOARDING POLICY

Owner's Name _____ Pet's Name(s) _____ Pick Up Date _____

Special Care Instructions:

1.) We would like to provide the best care for your exotic pet. Please provide us with all of your special care instructions:

Feeding (Please specify type of Diet & how often): _____

Water: _____

Birds: Does your bird get covered at night? **N/A:** _____ **Yes:** _____ **No:** _____

Other Care Instructions: _____

2.) If your pet is taking medications, please list quantity and times per day they are given. A fee of **\$2.00 to \$6.00** per day will be charged for administering medications. (cost varies with species type)

| <u>Medications</u> | <u>Amount to be given</u> | <u>Times per day</u> |
|--------------------|---------------------------|----------------------|
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3.) I understand that the hospital is not responsible for loss or damage to personal items left with the pet. Please list personal items:

4.) 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? _____

5.) All pets are monitored closely by our staff during their stay. 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.

Owner/Agent Signature _____ **Date:** _____

Emergency Phone _____ **Other Phone:** _____