



# Dog Boarding Registration

Reservation dates from \_\_\_\_\_ to \_\_\_\_\_ AM OR PM

Daycare attendant initials: \_\_\_\_\_

Emergency phone (\_\_\_\_\_) \_\_\_\_\_ Alternate contact phone (\_\_\_\_\_) \_\_\_\_\_

### Feeding Instructions

### Directions:

### Cups per Day

- I brought my own food \_\_\_\_\_ am \_\_\_\_\_ noon \_\_\_\_\_ pm
- SSAH to provide food \_\_\_\_\_ am \_\_\_\_\_ noon \_\_\_\_\_ pm
- My dog has eaten today (check if yes) \_\_\_\_\_ Free Feed

Does your dog have any behavioral or medical problems we should be aware of? i.e. allergies, blanket eater etc.

### Personal Items

Bedding	
Toys	
Can they have treats?	
Leash/Collar Color	

SSAH provides bowls, toys, and blankets/beds for all boarding animals.

**\*\*SSAH is not responsible for pet belongings that are damaged or lost in our facility\*\*** \_\_\_\_\_ initials

### For Your Safety

Please note that many vaccines do not take affect for 10-14 days, so we recommend your dog be vaccinated a minimum of 2 weeks before boarding at South Suburban Animal Hospital. This is a recommendation but not a requirement. I agree and understand this policy. \_\_\_\_\_ initials

Although all animals are temperament tested, there is still a risk of potential aggressive behavior while socializing with other boarding animals. SSAH is not responsible for injuries occurred during the time of boarding. I agree to and understand this policy. \_\_\_\_\_ initials

### Vaccinations

\_\_\_\_\_ Current vaccinations from South Suburban Animal Hospital

\_\_\_\_\_ Vaccinations from another animal hospital

Date of current vaccinations from another hospital:

Rabies \_\_\_\_\_ DHLPP \_\_\_\_\_ Bordetella \_\_\_\_\_

For the safety of your dog(s) as well as our other guests, all vaccines must be current. We require written proof or phone confirmation from your referring veterinarian of vaccinations, including Rabies and DHLPP, Bordetella for any dog(s) that stays at South Suburban Animal Hospital. If you are unable to provide proof of these vaccinations, a doctor at our facility will provide a comprehensive physical exam and appropriate vaccines, which are your financial obligation. Your dog(s) must be free of internal and external parasites, including fleas and ticks. **If not, we will treat your dog(s) at your expense.**

### Veterinary Services

Is your pet currently on any medications? Yes or No

If so which medications... \_\_\_\_\_

Our doctors can provide a variety of veterinary services while your dog stays with us at your request.

Dr. \_\_\_\_\_ Technician \_\_\_\_\_ Grooming: \_\_\_ bath \_\_\_ bath/trim

Appt. date \_\_\_\_\_ Time \_\_\_\_\_ Appt. date \_\_\_\_\_ Time \_\_\_\_\_ Appt. date \_\_\_\_\_ Time \_\_\_\_\_

### Special instructions:

**Permission to treat:** Should my pet(s) become ill, a South Suburban Animal Hospital veterinarian may provide all medical and surgical treatment deemed necessary in the doctor's professional judgment. I acknowledge that in the event of my pet's illness, the South Suburban Animal Hospital staff 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 treatment of my pet until I am available to discuss further care and related fees with the attending veterinarian.

Do you wish to be contacted if treatment is necessary? Yes or No

I agree to and understand this policy.

Owners Signature: \_\_\_\_\_

Date: \_\_\_\_\_