

BOARDING FORM

Date In: ___/___/___

Date Out: ___/___/___

Pick Up Time: _____

Owner Last Name: _____ First Name: _____ Phone Number: _____

Pet Name: _____ Emergency Contact: _____ Phone: _____

Please check Yes or No (Additional Fees apply):

Do you want a bath while boarding? Y___ / N___

Nail Trim? Y___ / N___

Brief Ear Cleaning? Y___ / N___

*Please Note: For the safety of your pet and others that are boarding with us, we require that all pets be current on their vaccinations, as well as, flea and tick prevention. For dogs, this is a current Rabies, DHLPPC Bordatella, and Influenza. For cats, this is a current FVRCP and Rabies. ** A 50% DEPOSIT IS REQUIRED FOR ALL PETS BOARDING FOR ANY LENGTH OF TIME***

Is your pet current on all vaccines? Y___ / N___

If no, may we update your pets' vaccines today? Y___ / N___

Is your pet current of heartworm/ flea/ tick prevention? Y___ / N___

If not, may we administer prevention today? Y___ / N___

Vaccines/ Services to be performed during your pets visit (*exam required to administer vaccine*):

DHLPPC ___
DHPPC ___

Bordetella ___
Leptospirosis ___

Rabies ___
Fecal ___
Microchip ___

Influenza ___
FVRCP ___

Heartworm Test ___
FELV ___

Sometimes a pet objects to us trying to help him/her and becomes irritated enough so that we cannot accomplish our goal. Should this occur, may we sedate your pet to complete the work? If so, there will be an additional fee for sedation. NCAH hospitalizes sick pets and if your pet is not fully vaccinated he/ she may be exposed to contagious viruses

YES you may sedate

NO you may not sedate

Special Food or Medication: _____

Time Fed/Medicated: _____

Additional Notes/ Comments: _____

Client Signature: _____

Date: _____

THANK YOU FOR CHOOSING NORTH CHANNEL ANIMAL HOSPITAL FOR YOUR PETS' VETERINARY NEEDS!