

Boarding Agreement

Pet's name: _____

Owner name: _____ Phone: _____

In case of emergency contact: _____ Phone: _____

Other than the people listed on my account, I give _____
permission to pick up my animal(s)

Date dropped off ____/____/____ Pick up date ____/____/____

All animals are to be up to date on all vaccines in order to board at our facilities.

Dogs require Rabies, Distemper, Lepto, Parvo, Bordatella, Influenza, Heartworm test and Fecal.

Initial _____

Cats require Rabies, FVRCP, Leukemia, Fecal.

Initial _____

Reasonable precaution will be used against injury, escape, or death of your pet. The clinic and staff will not be held liable for problems that develop provided reasonable care and precautions are followed. I understand that any problem that develops with my pet will be treated as deemed best by the staff veterinarians and I assume full responsibility for the treatment expense involved. All charges shall be paid upon release from the hospital. If the pet is not called for within 5 days after the time specified for return and if we are not notified of an alternate date within the 5 day period, the animal will be considered abandoned and may be disposed of as the doctor sees fit. It is understood that this does not relieve me from paying for all costs of services and use of the hospital.

Initial _____

FLEAS/TICKS

Any animal coming in with fleas and/or ticks will be treated with our product of choice at the owner's expense.

Initial _____

HURRICANE/TROPICAL STORMS

In the event of a tropical storm/hurricane, it is understood that I am responsible for picking up my pet prior to a mandatory evacuation. By signing this form, I am confirming that I understand I am responsible for my pet in the event of a natural disaster and that Beach Veterinary Clinic will not be held accountable for my pet. It is also understood that if I am unable to evacuate my pet, the clinic and staff will make an attempt to evacuate my pet to another facility. By signing this form I am giving permission to take my pet to another facility and I will be held responsible for the extra cost of boarding at this facility and the expenses involved in transportation of my pet. I am also confirming that neither Beach Veterinary Clinic nor the emergency backup boarding facility will be held in any way responsible for any injury, escape, or death of my pet.

Initial _____

Your pet may be picked up between 12:30 and 5pm Monday thru Friday and Saturday between 9-11:30am. There is no pick-up available on Sundays or holidays. A complimentary bath will be given unless none is requested.

I agree to all of the above information.

Sign: _____ Date ____/____/____