

BOARDING ADMISSION FORM

Owner's Name: _____ Drop Off Date: _____
Pet's Name: _____ Breed: _____ Age: _____ Sex: _____ Color: _____
Emergency Phone Number(s): _____
Pick Up Date: _____ AM PM

Vaccination History

Cats: Current Update Today
FVRCP+
FeLv
Rabies

Dogs: Current Update Today
DHLPP(C)
Lyme
Rabies

Is your pet on heartworm preventive? Y/N

Current Diet: _____

Has your pet been checked for intestinal parasites in the last 6 months? Y/N

Special Feeding Instructions, If Any: _____

Any vomiting, coughing, sneezing or diarrhea? Y/N

Is your pet allergic to any drugs? Y/N
If yes, what? _____

SERVICES REQUESTED AT ADDITIONAL CHARGE:

Has your pet had any illness or injury in the past 30 days? Y/N

- Physical Exam
 Specific Problem: _____
- Vaccinations Updated As Above
- Anal Gland Expression
- Heartworm, Lyme, Ehlr Test
- Fecal Exam
- Bath/TNT/Ear Cleaning
- Toenail Trim
- Other: _____

Is your pet on any medication? Y/N
If yes, what? _____

If there is evidence of fleas, topical flea drops must be applied.
There is a fee charged for this service.

- No Flea Evidence Seen
- Flea Evidence Present: Apply Flea Drops Upon Admission

OWNER RELEASE

I understand you cannot guarantee the health of my pet. I understand and will not hold the clinic responsible for conditions that are unavoidable in boarding kennels, such as, but not limited to, weight loss, hair loss, upper respiratory infections, bronchitis, diarrhea, and fleas. I understand all pets admitted to the clinic must be protected against contagious diseases and must be free of internal and external parasites or will be treated on entry or discovery at the owner/agent's expense.

I understand that in the event of my pet becoming ill, the staff will immediately attempt to contact me or my agent to discuss the problem and treatment options. I understand that 24 hour supervision is not provided.

If any problem is observed or develops: (Please choose one)

- Please treat my pet as required.
- Perform only emergency and supportive care. Notify me for permission to begin any other treatment.

Should an **EMERGENCY** arise, I authorize the medical staff to sedate and/or perform such emergency procedures or surgery as may be necessary for the health of my pet until I can be notified. I agree to pay, in full, all charges for services rendered.

I understand that the clinic is not responsible for loss or damage to personal items left with my pet including but not limited to leashes, collars, toys, bedding, and bowls. We do not accept glass or ceramic bowls. Owner / Agent Initials _____

The clinic is to use all reasonable precaution against injury, escape, or death of your pet. The clinic and staff will not be held liable for any problems that develop provided reasonable care and precautions are followed. I understand that any problem that develops with your pet will be treated as noted above and I assume full responsibility for the treatment expense incurred.

I will call if my "pick-up date" changes so you can plan accordingly. If I neglect to pick up my pet within 5 days of the date scheduled for discharge, and do not notify you within that time period, you may assume that my pet is abandoned and are hereby authorized to dispose of my pet as you deem best and/or necessary.

I understand that boarding is charged per day. If you do not pick up by 9am then a boarding charge will apply for that day.

Date: _____ Owner / Agent _____ Admitting Technician _____

Date: _____ Owner / Agent Initials _____ (I have received all personal items, meds, etc. that I brought with me.)

Elk Neck Vet Clinic
1657 Turkey Point Rd.
North East, MD 21901
410-287-6670

Date_____

Our boarding drop-off times are as follows:

BY APPOINTMENT ONLY!!

Monday, Tuesday, Wednesday and Friday: 10am – 6pm.

Thursday: 10am – 1pm **or** 5pm – 6pm

Saturday: 10 – 12noon **or** 6pm.

Sunday: 9am **or** 6pm.

Your current drop off time is on _____ at _____.

Our boarding pick-up times are as follows:

Monday, Tuesday, Wednesday and Friday: 8am – 7pm

Thursday: 8am – 2pm or 4pm – 7pm

Saturday: 9 – 12noon or **at** 6pm.

Sunday: 9am **or** 6pm.

Please notify us if your reservations change.

You may choose to bring your own food, bowls, toys, bedding, and treats, or you can choose to use our supplies for no additional charge (we feed dry food, so if you would like your pet to get wet food, you will need to bring your own.) If you do bring your own items, we will not be held responsible for the loss or damage of any of them. We do not accept glass or ceramic bowls.

We require all animals boarding with us to be current on the rabies and distemper vaccinations, if your pet is not up-to-date at the time you need to board, we will update your pet while here.

If your pet is presented to us with any fleas, a topical flea medication (Frontline, Advantage, etc.) will be applied at the time of drop off.

Our boarding facility does not have 24 hour supervision, if any problem is observed or develops, we will call you immediately, but you will also have the following two options to choose from:

1. Please treat my pet as required.
2. Perform only emergency and supportive care. Notify me for permission to begin any other treatment. Should any **EMERGENCY** arise, I authorize the medical staff to sedate and/or perform such emergency procedures or surgery as may be necessary for the health of my pet until I can be notified. I agree to pay, in full, all charges for services rendered.

The drop-off process will take approximately 10 – 15 minutes to go over paperwork, so please plan your schedule accordingly.