

Boarding Admission Form

Owner's Name:		Date:
Patient Name:		
Breed:	Sex:	
	ve entrusted us with your pet's ca nsure everything is in order for the	re while you are away. The following ir stay.
Mandatory Emergenc	y Contact:	
	nal parasites. If any are found, yo	rely. He/She will also be inspected upon arrival ur pet will be treated before entering the
testing, prior to entering th	ne boarding facility. If a parasite scree be treated accordingly, at your exper	cinations, exam, parasite testing and FELV/FIV ning is done while your pet is boarding, and it comes use. This ensures your pet's protection as well as the
Stomach diet according to needed, we can also oper any special feeding instruc	their size. However, we will be happy a new bag of food for your pet during	brought, your pet will be fed a Hill's Sensitive to feed any food that is brought with your pet. If their stay and put it on your account. Please leave that your pet may need will also be given to them by ctions or prescription labels.
bedding is changed and w permanent marker prior to	rashed as needed. Any personal item check-in. Any personal items left beh	sughly every day (more often when needed) and all so brought with your pet should be labeled with a hind will be tagged with your name or put in our lost I be donated to a local rescue group or disposed of.
	ip during your pet's stay with us. \$50	find their way home without permanent identification. .00 (this includes the first year of Home Again
\$20.00 - \$35.00 depending expression. One of our st	g on the size of pet and length of hair. aff members would be happy to give a	ore going home. The charge for bathing ranges from Bath includes nail trim, ear cleaning and anal gland in exact price at check in. BATH () YES () NO & Up Date/ Time:
fee (\$5.00) per boarding stay	. , , , ,	nd departures are available at 4:00 p.m. for an additional vals on a Holiday. Check out M-F is between 7:30 a.m. & after 12:00 p.m.
		of outdoor playtime per day your pet stays with us for) YES ()NO How Many Days
ALTERNATE PERSON	TO PICK UP:	
	ess or complication arise. Further, I as	star Animal Care to provide any appropriate care ssume financial responsibility for all services
SIGNATURE OF OWNER	/RESPONSIBLE AGENT:	
PHONE NUMBER WHER	E YOU MAY BE REACHED:	