



Boarding Agreement

Owner's Name: _____ Phone Number: _____

Pet's Name(s): _____

Admission Date: _____ Discharge Date: _____

****Please acknowledge items below with an initial**

_____ In order for your pets to be boarded they must have CURRENT (within one year) vaccinations, including:
Dogs: Rabies, DHPP/DHLPP, and Bordatella at least 5 days prior.
Puppies: Rabies (12 weeks or older), 2 sets of DHPP/DHLPP, and 2 sets of Bordatella given by a veterinarian with the last set given 2 weeks prior.
Cats: Rabies, FVRCP, FELV.
 Your pets must be free of all external parasites (fleas, ticks).
 IF NOT, WE WILL TREAT THE PET AT YOUR EXPENSE (\$7.75).

_____ If a dog is daycare boarding and has to stay the night an overnight boarding fee will be charged instead of the daycare boarding.

_____ Long term boarding, a week or longer, will have to be paid in advance.
 If payment is not kept current then animals will be released to the proper authority.

_____ If animal becomes sick while boarding, we are authorized to treat the animal for the welfare of the animal. Any charges that may incur because of treatment will be the responsibility of the owner.

_____ I agree to retrieve my pet(s) by the designated date unless I contact Seguin Animal Hospital to make other arrangements. I understand that if I fail to retrieve my pet(s) on the discharge date stated above, Seguin Animal Hospital will consider them abandoned 10 days after discharge date and has the authority to handle my pet(s) as deemed necessary by Seguin Animal Hospital. I understand that I am legally responsible for any fees incurred for abandonment.

Pets are fed Hill's Prescription Diet, unless you provide a different food for them. Fresh water is available at all times. Their spaces are cleaned at least twice a day. Your pets are taken out three times a day. Our kennel is not responsible for personal belongings left with your pet. All pets that are charged for 3 nights or more of boarding will receive a bath at no charge. This does not include any grooming, toenail trims, anal gland expression, ear cleaning, or flea control.

Please pick up all boarding pets after 10am (if being bathed).

****I have read and understand this authorization and agreement.**

Owner's Signature: _____ Date: _____

Emergency contact: _____ Emergency Phone: _____



SEGUIN ANIMAL HOSPITAL

Boarding Treatment and Services

Pet Name: _____ Dates of Stay: _____

**Please list any health issues or concerns (seizures, blindness, deafness, anxiety, etc.).

Does your pet need to be examined by a doctor for any concerns or health issues?

YES NO

If so, please describe: _____

(Exam: \$46)

Food:

- Personal Food
 Hospital Provided (no additional charge)

Is your pet fed in the?

AM PM BOTH

Has your pet been fed today?

YES NO

How many cups fed? (Per Feeding)

Medications:

Is your pet on any medications?

YES NO

Has pet been medicated today?

YES NO If yes, what time? _____

****All medications must be in the original container, with prescription label****

List all medications and instructions:

	AM NOON PM

Bath or Groom: (please circle one)

Do you want your pet bathed or groomed morning of departure? (\$25-\$95)

BATH GROOM

*Pets that stay 3 nights or more will receive a free bath the morning of departure and will be ready to go home after 11am.

List and describe personal belongings: _____

Any other concerns? (boarding with housemate, jumps fences, escape artist)
