

Irondequoit Animal Hospital Boarding Admission Form

Pet's Name _____ **Dates: Check in** _____ **Check out** _____

For our boarding clients, proof of current vaccinations is required (rabies, distemper, kennel cough and *k9 Influenza** Vaccines) –if proof is not presented at time of check in we will vaccinate and an exam fee will be charged along with the cost of any vaccines given.

Please answer **all** the following questions as **clearly and completely** as possible so we can provide the best care to your pet.

Feeding Instructions

Please Feed: Food Provided by Kennel or Food Provided by Owner

Feed my pet: Once a day AM or PM / Twice a day / Three times a day / Free Feed

How much my pet eats: Dry _____ Canned _____

Has you pet eaten today? Yes No / Does your pet need to eat again today? Yes No

Health Concerns

Would you like your pet to have a doctor's exam during his/her stay? Yes No

If there are any concerns please note:

(Additional treatments, medications or vaccines ect will be an extra charge) O Dr. _____ or any

Vaccines Needed: DHLPP Lepto k9 kennel cough k9 influenza FVRCP FELV Rabies

Other Services: Heartworm test Stool Sample Senior Bloodwork

Does your pet have any preexisting medical problems we should be aware of? Yes No

If yes please explain:

Has your pet been ill during the past 2-4 weeks: Yes No

If yes please explain:

Medications : Is your pet on medication(s)? Yes No

Has your pet received all of today's meds? Yes No

Name of medication _____ Directions: _____

Name of medication _____ Directions: _____

Name of medication _____ Directions: _____

Name of medication _____ Directions: _____

Services

Bath (includes nail trim) Yes No

Nail trim only Yes No

Playtime Yes No

Walks Yes No **Please Select** 1 walk per day 2 walks per day 3 walks per day

Office Use:

Pets Weight _____

CSR _____

Estimate Given Declined

Stickers Here

Authorization For Treatment

If my pet should become ill and require surgical or medical treatment, I give my permission for the staff to do whatever necessary for my pet's well being. I also give my permission to vaccinate my pet if he/she is overdue for distemper, rabies or k9 influenza vaccinations. A vaccine to protect against kennel cough is required annually for dogs boarding with us.* There will be an additional charge per day for giving medications.*

Release Authorization

If your pet becomes sick during his/her stay with us, a veterinarian will examine your dog or cat. Uncomplicated problems such as persistent diarrhea, abrasions from rubbing on cage doors and the like will be treated medically. Potentially more serious problems, (examples: failure to eat, persistent vomiting, inability to stand, difficulty urinating), may warrant diagnostic blood, urine tests and even x-rays. If the situation appears serious enough, your pet may be taken to the Animal Emergency Service on East Henrietta Road for 24-hour care. Any costs incurred will be the responsibility of the pet owner. The undersigned acknowledges contracting for the above services and understands that he/she is responsible for all balances due upon discharge of the pet(s). If someone other than the owner is to pick up a pet from boarding, please let us know when that pet is brought in. We will not release an animal to someone other than the owner without prior authorization from the owner. All pets must be picked up within 5 days of specified check-out date. All efforts to contact owner or agent will be made in a timely manner. Failure to respond and/or pick up pet(s) will result in facility protocol for abandoned animals.

IN ORDER TO MAINTAIN A "FLEA FREE" ENVIRONMENT, YOUR PET WILL BE CHECKED FOR FLEAS UPON ADMISSION. IF FLEAS ARE PRESENT, YOUR PET WILL BE TREATED WITH ADVANTAGE, REVOLUTION OR FRONTLINE (AT THE DOCTOR'S DISCRETION) AT YOUR EXPENSE.

If you have questions or concerns about your pet and possible treatment during this visit, we encourage you to speak with one of our veterinarians. We will make every attempt to contact you at the numbers you provide should your pet become ill while with us. If there are limitations to the care you wish us to provide your pet, please inform us before you leave your pet with us.

BELONGINGS

Due to the number of dogs & cats we accommodate & their belongings, we ask that you fill out a belongings form as completely as possible to help insure that we can return to you what you have brought in. **We cannot accept responsibility for the personal belongings that may become lost while your pet is boarding.** We do provide bedding (blankets, towel, etc.) in kennels for all pets during their stay. **If you still plan on leaving personal belongings please fill out the following form:**

PLEASE PRINT

BEDDING/BLANKETS: _____

***Please note we will do our best in make sure your bedding comes back to you clean, however if you are leaving large/bulky beds with us our washing machine does not accommodate them so we are unable to wash them. Please let us know if your bedding is not able to go through a washing machine/dryer.

TOYS: _____

FOOD: _____ TREATS: _____

RAWHIDE BONES I authorize the staff at Irondequoit Animal Hospital to give my dog(s) any rawhides that I provide during his/her stay _____ please sign

LEASH AND OR CARRIER: _____

MISC.: _____

Signature _____

Best Phone Number to Contact You: _____

Emergency Contact: Name _____

Phone _____

Regular Vet and Veterinary Hospital _____

THANK YOU!!!