



## Boarding Admission Form

Today's Date: \_\_\_\_\_

IN CASE OF EMERGENCY NOTIFY: \_\_\_\_\_ PET'S NAME: \_\_\_\_\_  
TELEPHONE NUMBER \_\_\_\_\_

Pick up date: \_\_\_\_\_ am or pm (circle one)

**\*\*\*Please note if you request a bath for your pet, he/she will not be ready until after 4pm on your pick up day.**

Would you like your pet to have a bath? YES or NO

Type of food: DRY CANNED Prescription

IS YOUR PET ON ANY MEDICATION? \_\_\_\_\_

If so, what? And when is the medication to be given? WHEN WAS THE LAST DOSE GIVEN?

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Does your pet have any medical problems we need to be aware of?

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ALL DOGS MUST BE CURRENT ON THE FOLLOWING VACCINES TO BOARD: RABIES, BORDETELLA AND DISTEMPER-PARVO COMBO.

ALL CATS MUST BE CURRENT ON THE FOLLOWING VACCINES TO BOARD: RABIES AND FVRCP.

**If they are not current, they will be administered at the owner's expense.**

\*\*\*\* While we try our VERY BEST to keep our kennel FLEA FREE, not every pet that boards with us uses adequate flea prevention/control. Therefore, unless your pet has Advantage or Frontline applied once a month, we cannot guarantee that your pet will return 100% flea free. If you would like one of these products applied to your pet, **for a fee**, while boarding, please indicate so here \_\_\_\_\_.

If tranquilization is necessary for treatment or handling, I give my permission to this hospital to administer such medication.

I give my authorization to Dr. Sokol and her staff to provide any care warranted should a **medical situation** come to our attention while your pet is boarding with us. Should a **LIFE THREATENING** emergency arise, we will make every reasonable attempt to contact the owner and/ or emergency contact listed above, once the pet is stable,

*Full Payment is required when pet is released. If your account has to be collected by or through an attorney, you will be responsible for all such costs and expenses of collection, including attorney's fees.*

**Pets are released only during regular office hours. NO EXCEPTIONS!**

Your pet will only be released to the person who signs this form unless you request a "non-owner" pet release form to sign. Berkeley Lake Animal Hospital reserves the right to release pets to OWNERS ONLY in certain situations, despite having a "non-owner" release.

**I have read and agree to the above instructions.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_