

BOARDING ADMISSION FORM

Owner's Name: _____ Pet's Name: _____

Admit Date: _____ Estimated Time: _____ Breed: _____ Age: _____

Pick-Up Date: _____ Estimated Time: _____ Color: _____ Sex: _____ Altered? _____

Required Vaccinations: For the safety of your pet and other pets boarding, we require the vaccinations below before admitting.

Canine

	Date Given	To Be Given
Distemper:	_____	_____
Lepto:	_____	_____
Rabies:	_____	_____
Influenza:	_____	_____
Bordatella:	_____	_____

Onset: Intranasal: 72hrs Injectable: 14 days (unless annually booster)

Feline

	Date Given	To Be Given
Distemper:	_____	_____
Rabies:	_____	_____
Leukemia:	_____	_____

Leukemia vaccinations are recommended, but not required.

Intestinal Parasite Screen: _____ *Results*

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Flea Prevention: _____

Flea Prevention: _____

Brand: _____

Brand: _____

Optional Services Available:

- Dismissal Bath: \$15 - \$40
- Medicine Admin \$5/day
- Toe Nail Trim \$17.42

Complimentary Options:

- Daily Photo Text Phone # _____

Medical Services Available

- Physical Exam \$39.68
- Fecal Exam \$ _____
- Flea Prevention \$ _____
- Vaccinations
 - Distemper \$ _____
 - Rabies \$ _____
 - Leukemia \$ _____
- Other _____ \$ _____

Other Health Questions:

Is this pet on heartworm preventative? _____ Last dose given? _____

Any vomiting, coughing, sneezing, or diarrhea? _____

Allergies known, including medications? _____

Has this pet has any illness or injury in the last 30 days? Explain _____

Is this pet on any medications?

Name: _____ Name: _____ Name: _____

Directions: _____ Directions: _____ Directions: _____

Next Dose Due: _____ Next Dose Due: _____ Next Dose Due: _____

Current Diet: _____ Treats: _____ Litter: _____

Special Feeding Instructions: _____