

DEL RAY ANIMAL HOSPITAL BOARDING AGREEMENT

- Date: _____
- Owner's Name: _____
- Animal's:
 - Name: _____
 - Breed: _____ Color: _____ Age: _____
 - Sex: _____ (Spayed / Neutered / Neither)

Boarding Charges:

Boarding at Del Ray Animal Hospital is charged from the day the pet is brought in until the day the pet is picked up, REGARDLESS of the time of day. There is an additional charge for special diets (if not supplied by the owner) and medication administration.

BOARDING DATES: From: _____ To: _____

Feeding, Medication, and Belongings:

Del Ray Animal Hospital feeds its boarders Purina EN- a bland, highly digestible diet- to help prevent intestinal problems like diarrhea or vomiting. If you have brought your own food or your pet requires a special diet that we regularly stock, please indicate below.

Did you bring your own food: Yes No

If yes, Type of food: _____

Feeding Schedule: _____

Please fill in the form below to indicate what kind of medications your pet is to receive and the dose:

Medication: _____ Dose: _____

Medication: _____ Dose: _____

Medication: _____ Dose: _____

Belongings:

If your companion is overdue for (or there is no proof of any of the following vaccines) then they will **have to be given** while your companion is boarding with us. Additional fees will apply.

Canine Vaccines Required: Bordatella, Rabies, Distemper and Lepto, Fecal
Feline Vaccines Required: Rabies, Distemper, Fecal

If your pet's vaccines were not given at Del Ray Animal Hospital please write in the Dates Vaccines are due and the name and phone number of Veterinary Clinic Vaccines administered at. Written proof is required also. Don't forget to bring your previous vaccination history with you!

Canine:

Rabies Due: _____
Distemper Due Date: _____
Bordatella Due Date: _____
Fecal Due Date: _____

Feline:

Rabies Due: _____
Distemper Due: _____
Fecal Due: _____

Clinic Name and Phone Number where vaccines were administered:

I give Del Ray Animal Hospital permission to examine and give my pet any required vaccines/tests(fecal) due while boarding with us.

Owner Name: _____ Signature: _____

Additional services you may have done while boarding (please initial for yes):

Nail Trim: _____ (\$19.75)

Ear Cleaning (Dogs Only): _____ (\$17.50)

Soft Paws (Cats Only): _____ (Front feet only \$25.00 / Front and Back Feet \$37.50)

Does your pet need to be examined by a doctor while boarding with Del Ray Animal Hospital? Please write in below the reason the exam. There will be additional charges for the exam and any medications that may be prescribed by a doctor.

No, I would not like my pet examined for any condition other than for vaccinations that may be required for boarding. _____(initials)

Yes, I would like my pet examined for reasons other than vaccines. The reason that I have requested an examination on my pet is:

BATHING:

***Please circle one response!** There will be an additional cost for bathing and application of advantage, based on you pets weight at the time of boarding. If you fail to circle an option your pet will not be bathed.*

NO BATH

BATH ONLY

Cats: \$37.25

Dogs: 0-20lbs = \$36.00 / 21-50lbs = \$43.50 / 51-80 = \$44.75 / 81-90lbs = \$52.25
91+ = \$55.25

BATH WITH TOPICAL FLEA PREVENATIVE (ADVANTAGE)

Cats: \$42.50

Dogs: 0-20lbs = \$42.50 / 21-50lbs = \$47.75 / 51-80 = \$51.00 / 81-90lbs = \$59.25
91+ = \$62.50

*******Pets will be bathed the morning of discharge, unless otherwise specified by the owner, therefore, pick-up should be between the hours of 4:00pm to 7:00pm M-F and 12:00pm to 2:00pm on Saturdays*******

ADDITIONAL REQUIREMENTS:

If your pet should become ill while boarding with us, we will treat as deemed necessary. To protect other patients, all pets must be free of internal and external parasites. If not, they will be treated at the owner's expense. Rarely, an emergency can arise where anesthesia and surgery become necessary. In case you cannot be contacted, do we have your permission to perform any emergency procedure?

Please initial: Yes: _____ No: _____

**HOURS OF ADMITTANCE AND DISCHARGE
MONDAY - FRIDAY 7:15AM - 7:00PM
SATURDAYS 7:30AM - 3:00PM
CLOSED SUNDAYS AND HOLIDAYS**

Toys, chews and blankets are welcomed, but Del Ray Animal Hospital can not be held responsible if they are misplaced or damaged.

Please DO NOT leave expensive or one-of-a-kind items, they may not be returnable.

Emergency Contact Information

By signing below I certify that all the above information is correct and filled out completely to the best of my ability.

Daytime Phone: _____ Cell: _____

Sign(Print): _____ Signature: _____

The hospital is staffed by doctors and medical personnel from 7:15am - 7:00pm Monday - Friday and 7:30am - 3:00pm on Saturdays. This excludes holidays. There is not continuous medical staffing from 7:00pm - 7:15am Monday - Friday and from 3:00pm Saturday - 7:15am Monday. The animals are fed and watered regularly during non-staffed hours.