

Boarding Admission Form



For Office Use Only

Admitted By:	Date:	Discharged By:	Date:

Client's Name: _____ Phone Number: _____

Patient's Name: _____

Date of Drop Off: _____ Date of Pick Up: _____

Emergency Contact's Name: _____ Phone Number: _____

In the event of an emergency, we will attempt to contact you **FIRST**, and then your emergency contact. If we are unable to reach either of you, what is the dollar amount you do not want us to exceed until we are able to reach you?: _____. **If you do not put an amount and your pet does have an emergency, we will not be able to treat him or her until we are able to get in contact with you.**

The most common "emergencies" we see in pets who are boarding would be:

- Loose stools or diarrhea
- Constipation or straining to defecate
- Vomiting
- Failure to eat

Feeding Instructions

Our boarding food is a low residue diet specially formulated for pets that have to make a quick change in their diet so they do not become ill. Currently, we use Purina EN food for both dogs and cats. You are more than welcome to use our boarding food and a **\$2.50 charge will be added to your bill for each night**. If you bring your own food, we will use that and waive the feeding charges. Please fill out the following information to ensure we are able to keep your pet's feeding schedule as close to yours as possible.

Did you pack your own food for your pet?: Yes or No

If you packed your own food, is it wet or dry?: Wet Dry Both

How much do you feed your pet?: _____, _____ times a day. Or circle: Free Feed

If you pack your own food and we run out of it, we will use our boarding food and you will be charged for the number of nights we use ours!

Medication Instructions

If your pet needs medications given while they are boarding, a **\$2.50 charge will be added to your bill for each night**. Please list any medications your pet takes along with how often and when they are given: _____

Specialty Care Instructions

I understand and agree that my pet must be up to date on the vaccinations required by this hospital (or will be vaccinated while they are here at my expense). Vaccinations needed are: Rabies, Distemper, and Bordetella, along with a stool sample. If my pet needs any vaccines, I allow a doctor to perform an examination prior to any injection. I am also aware that the Bordetella vaccination helps in the prevention of kennel cough; however, it does not guarantee that my pet will not contract kennel cough while boarding at this facility, and the treatment of this infection will be at my own expense.

I understand that boarding special needs pets, puppies, or senior pets leads to having a higher risk of injury, stress-related illness, or exacerbation of any pre-existing conditions. As such, by boarding my special needs pet, I am waiving any claim for injury or illness experienced by my pet while he/she is in the care of Northside Pet Hospital.

Signature: _____ Date: _____