

Trumbull Animal Hospital Canine Boarding Admission Form

Patient Name: _____

Client Name: _____ **Phone:** _____

Emergency Contact: _____ **Phone:** _____

Admission Date: _____ **Discharge date:** _____

In order to board at our facility, your pet must be current on vaccines and have a **negative fecal within the last 6 months**. If your pet does not have a current fecal, one will be obtained while boarding and sent to the lab at a cost of **\$42.00**, and vaccines will be updated at your cost.

FOR AN ADDITIONAL CHARGE would you like your pet bathed? **Yes** **No**

Pets who are bathed are not available for pick up until noon of the day of discharge unless other arrangements are made. Pets staying for 7 or more nights receive a complimentary bath at discharge unless you choose not to have a bath.

FOR ALL BOARDERS: Pets are walked at least 3 times daily

Under 50 pounds: \$40.00 per night*
Over 50 pounds: \$42.00 per night*
*plus tax

Medicated boarder once daily medication (additional charge): \$4.00 per night
Medicated boarder twice daily medication (additional charge): \$8.00 per night

Number of Happy Camper play days: _____

Pets can be given one on one supervised play time totaling 30 minutes per day in our new outdoor play area for an additional \$18 per play day (Weather permitting. No play days available on weekends or holidays)

We supply Science Diet dry and canned food to our boarders; however, it is best to avoid diet changes that can lead to gastrointestinal upset so you may provide your own food for your pet. Prescription diets must be supplied or purchased through the hospital.

Please list any supplied food or treats with feeding instructions:

We supply warm bedding, clean food & water dishes. Please list any personal belongings you are leaving with you pet. We can not be responsible for any damage to items left with your pet. All property should be clearly marked with your name.

Belongings brought: _____

Please indicate any medications or special treatments your pet will require while boarding. All medications must remain in original dispensing bottles with instructions and pet's name:

In case of emergency, the staff of Trumbull Animal Hospital will make reasonable attempt to contact you or your designated representative. In the event that you cannot be reached, you hereby give permission to the doctors & staff of Trumbull Animal Hospital to perform treatments as deemed necessary. You will be responsible for any emergency charges at the time of discharge.

Signature: _____ **Date:** _____