

Trumbull Animal Hospital Exotic Boarding Admission Form

Patient Name: _____

Client Name: _____ **Phone:** _____

Emergency Contact: _____ **Phone:** _____

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

In order to board at our facility, 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 will be updated at your cost.

We **do not** supply bedding, food, lighting, or housing. Please list any personal belongings you are leaving with your pet. We cannot be responsible for any damage to items left with your pet. All property should be clearly marked with your name.

Please list any supplied food or treats with feeding instructions:

<u>FOOD</u>	<u>Amount per meal</u>	<u>Frequency</u>
1.		
2.		
Treats:	Time of Pet's Last Meal	am / pm
Feeding Instructions:		

Medications: Please list all medications your pet is currently taking

There will be an additional charge per day associated with giving medications

<u>Medication</u>	<u>Dosage Instructions</u>	<u>Date and time last given</u>
1)		
2)		
3)		

Belongings brought:

<input type="checkbox"/> Food	<input type="checkbox"/> Bedding	<input type="checkbox"/> Toys
<input type="checkbox"/> Treats	<input type="checkbox"/> Light / Heat Source	
<input type="checkbox"/> Food/ Water Bowls	<input type="checkbox"/> Critter Hut	<input type="checkbox"/> Others
<input type="checkbox"/> Hay	<input type="checkbox"/> Medications	

Permission for treatment

In case of emergency or illness, 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 or give medication as deemed necessary. You will be responsible for any additional charges at the time of discharge.

Signature: _____ **Date:** _____