

Northside Animal Hospital Boarding Information

Welcome to "Camp Northside!" We are so pleased that you have decided to leave your pet in our care. We know you have entrusted us with a family member, and we will strive to give only the best personal attention to your special friend. Please be sure to fill out the following information sheet so that we may provide the most complete care possible.

Thank you,
The Staff of Northside Animal Hospital

Owner Name: _____ Pet's Name: _____

Boarding Dates: _____

MEDICATION

- Is your pet on any medication? **YES** **NO**
 - A \$1.94 per administration charge will apply

MEDICATION _____ DOSAGE _____ LAST GIVEN _____

MEDICATION _____ DOSAGE _____ LAST GIVEN _____

MEDICATION _____ DOSAGE _____ LAST GIVEN _____

DIET

- Did you bring your pet's food? **YES** **NO**
- How many times is your pet fed per day? _____
- How much food do you feed per meal? _____

(We feed Hill's Adult Maintenance Sensitive Stomach dry if diet is not provided)

PERSONAL ITEMS

- Please note any personal belongings you are leaving with your pet: _____

While we work hard to assure care of personal items, Northside cannot be responsible for lost or destroyed items.

(OVER PLEASE)

VETERINARY CARE

- Your pet is due for the following Vaccines:

Feline: Rabies* _____ FVRCP* _____ Leukemia _____

Canine: Rabies* _____ DHLPPC* _____ Bordetella* _____

Heartworm Test* _____ Fecal* _____

*For the safety of your pet and the others in our facility, we require these vaccines and tests to be current. (additional charges will apply)

-Examination for any current problems: _____

PAMPER EXTRAS

- Pamper sessions/extra walks are available at \$6.00 per session.
Please indicate number per day: _____
- Would you like your pet to have a spa treatment before going home? **YES** **NO**
(includes a bath, nail trim, anal gland expression, and ear cleaning-a value of \$75)
A fee of \$35 will apply, and pick up will be after 12:00 PM
- If your pet does not need a spa treatment may we do a complementary refresher bath which will be done only if needed? **YES** **NO**
(does not include a nail trim, anal gland expression, or ear cleaning)
Please let us know if you plan on picking up before noon _____
- Would you like your pet to have a nail trim? **YES** **NO**
A fee of \$18.54 will apply

FLEA CONTROL

- We work very hard to control possible flea infestations in our hospital. However, in any setting with multiple pets and outdoor yard exposure, fleas can be a problem during certain times of year. If you wish, your pet may receive one of several flea treatments prior to leaving the hospital if you do not routinely use flea prevention. (Charge will apply)
- Would you like us to apply flea prevention? **YES** **NO**

AUTHORIZATION RELEASE

- Authorization for Medical Care and Financial Responsibility: In the event of accident or illness, I authorize treatment for my pet(s) deemed necessary by the veterinary staff of Northside Animal Hospital. I also agree to assume full financial responsibility for charges incurred during boarding.

Signature: _____ Date: _____

Emergency Contact: _____