

Rose Animal Clinic Boarding Agreement

Patient: <animal> <Client>

<first-and-spouse> <Client>

<City>, <St> <Zip>

<Address>

Emergency Contact Numbers- (phone number you can be reached at in case of an emergency or concern)

Number 1: _____

Number 2: _____

As a veterinary hospital if we cannot reach you, we feel obligated to treat any pet if a medical condition were to arise while boarding. By signing this form, you are authorizing us to treat your pet(s) at your expense if medical attention were to arise while in our care.

All boarding animals are required to be current on ALL core vaccines

- Dogs- Rabies, DHPP, Bordetella, Intestinal Parasite Screen
- Cats- Rabies, FVRCCP, Intestinal Parasite Screen

Boarding pets are required to be free of all internal and external parasites. A negative intestinal parasite screen is required before boarding. If any internal or external parasites are found we reserve the right to treat for the safety of others animals and staff.

❖ *Proof of current vaccines must be provided to us by the time of check-in or your pet(s) if not, they will be examined and vaccinated here at owner's expense.*

- Rose Animal Clinic is NOT responsible for any pet(s) causing injury to themselves due to stress, boredom, or thunderstorm anxieties. We are not here overnight and cannot prevent such events.
- You may bring a pet's food if you'd like to keep him/her on the same diet at no extra charge. We provide Purina EN (bland) Veterinary Diet food in the kennels. Fresh water will be available at all times. Any medications or vitamins brought from home will be administered for an additional fee. Exercise will be provided two to three times daily outside in our walking yard.
- Your pet's home is cleaned, sanitized, and given fresh blankets/bedding at least twice daily.

Note: Clinic staff is not responsible for any lost personal belongings that were left with your pet.

If you fail to pick-up your pet within 10 days of the scheduled check-out date without notifying us, we will consider the pet abandoned. Should the pet become abandoned we will seek out Legal action.

Payment is expected in full when services are rendered.

I understand and agree to the Rose Animal Clinic Boarding Policy

X _____ Date _____

<first-and-spouse> <Client>