Tuscawilla Animal Hospital - Boarding Release Form **Client Number: Patient Information:** Client Folder #: Name: Client Information: Species: Breed: Name: Address: Sex: City, State, Zip: Age: Phone #: Weight: Information above is correct? YES / NO (but corrections have been made) Emergency Phone #(s): Email address: Arrival Date: Departure Date: Bath Before Exit: YES / NO Groom Before Exit: YES / NO \*\*If your pet is having a bath, please pick up after 3pm Own Food: YES / NO Directions: Medication Directions & When Last Administered: **Vaccination Policy** To insure protection of all pets under our care the following vaccines must be up to date: DOGS - Rabies, DHPP, Canine Influenza, Bi-Annual Bordetella & Bi-Annual Fecal exam CATS - Rabies, FVRCP and Bi-Annual Fecal exam If not up to date or unable to provide proof of vaccinations I give permission to update my pet(s) vaccinations in accordance with the above policy. In addition, if any fleas or ticks are found on your pet while boarding they will receive a flea/tick bath at the owners' expense. **Medical Illness Policy** One of the advantages of Boarding your pet(s) at a Veterinary Hospital is that Veterinary attention is readily available should the need arise. If your pet becomes ill we will call the emergency number listed above regarding your pet's signs, treatment options and estimate of additional cost. If no one can be reached we will initiate treatment to mitigate the problem at the owner's expense. We will do our best to ensure that items left with your pet are returned. However, we are not responsible for the loss or destruction of items left with your pet. Persons picking up pet are responsible for making sure all items left with pets have been retrieved at exit. If a pet(s) remains unclaimed after pick up date, written notice will be mailed to the above address. Seven days after such notice the pet(s) will be considered abandoned and may be disposed of as we deem best. Such action will not relieve said owner from all costs incurred. Signature of Pet Owner or Responsible Party **Today's Date** Vaccinations: <reminders>