

# ORCHARD VIEW

*Veterinary Center*

## Boarding Admissions Form

Name: _____	Pet's Name: _____
Address: _____	Species: _____
_____	Breed: _____
Phone: _____	Age: _____ Sex: _____

Scheduled Arrival \_\_\_\_\_ Departure \_\_\_\_\_ Time \_\_\_\_\_

Kennel Type: (circle) Small Medium Large Run Cat Condo

Items Left: \_\_\_\_\_

Requested Services: (circle and/or cross out)  
TLC Bath Toe Nail Trim Anal Glands Conditioner

Science Diet Adult (House) is fed unless otherwise requested. Special diets need to be provided by owner.  
Please circle: House / Own Food: \_\_\_\_\_

Feeding Instructions: \_\_\_\_\_

Are any medicines necessary while boarding? Y / N

\_\_\_\_ Once Daily                      \_\_\_\_ Twice Daily  
\_\_\_\_ Three Times Daily              \_\_\_\_ Four Times Daily  
\_\_\_\_ Other: \_\_\_\_\_

Give names of any medications and the dosage to be given:

### REQUIREMENTS FOR BOARDING

1. All pets must have documentation of current vaccinations, administered by a veterinarian. Past due vaccines will be given at the owner's expense. (Canines: DHPP, Bordetella, Rabies. Felines: Rabies, FVRCP)
2. All pets must be free of parasites (e.g. Fleas, ticks, tapeworms, etc.) or they will be treated at owner's expense.
3. Orchard View Veterinary Center has my permission to do whatever is necessary should an emergency arise.
4. If a tranquilizer is necessary for treatment or handling charges may be applied if my pet is aggressive.
5. Check out time is 12:00pm. Pets may only be picked up during regular business hours. However, pets picked up after 12:00pm will be charged for that day. We are CLOSED ON SUNDAYS AND HOLIDAYS.
6. OVVC is not responsible for any items left with pets. Items left with pets will be labeled.

I have read the boarding requirements and understand the hospital's policies.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Secondary Contact/Release Information:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_