

BOARDING ADMISSION FORM

GENERAL INFORMATION

Owner: _____ **Date:** _____
In case of emergency Contact: _____ Phone Number: _____
Name of person to pickup pet(s): _____ Phone Number: _____
(If other than owner)
Date pet is to be picked up: _____ AM PM

PATIENT INFORMATION

Pet's Name: _____ **Breed:** _____ **Sex:** _____ **Age:** _____ **Color:** _____

Vaccine:	Given	Due
Rabies Vaccination	/ /	/ /
Distemper VACCINATION	/ /	/ /
Bordetella Vaccine (Dogs Only)	/ /	/ /

Is your pet on any medication? Yes No

Medication to be given while pet(s) are boarding (Bring medications in their original bottle):

1. _____ at AM Noon PM
2. _____ at AM Noon PM
3. _____ at AM Noon PM

Has your pet had any reactions to medications? Yes No

Does your pet have any problems we need to know about?

- Has your pet been coughing or sneezing? Yes No
Has your pet had any vomiting or diarrhea? Yes No
Does your pet (if a dog) climb fences? Yes No

Does your pet become anxious before or during thunderstorms and/or Fireworks?

Yes No Please explain _____

Does your pet have a history of tearing up/chewing on toys, blankets/bedding?

Yes No

What does your pet eat at home? Dry Canned How Much? _____ How often? _____

Does your pet have any food allergies or sensitivities? Yes No

If yes, please explain: _____

ADDITIONAL SERVICES

Bath? (includes nail trimming and anal gland expression) Yes No

If no, Nail Trim Only? Yes No

Please ask admitting personnel for cost estimate and pick up procedures.

**While in the Hospital
please check my pet for:**

1. _____
2. _____
3. _____
4. _____

(Initials) Due to the number of pets we care for, we cannot be responsible for lost articles (such as toys, blankets, towels, etc.); therefore, we suggest that you leave articles of value at home. If you decide to bring such articles for your pet, we will make every effort to return these to you.

- If tranquilizers are necessary for treatment or handling (especially thunderstorm anxiety) I give my permission to Mountain Park Animal Hospital to administer such medications.
- All animals entering the hospital must be up to date on vaccinations & free of external parasites (fleas, ticks, etc.) or they will be treated at the owner's expense.
- I authorize Mountain Park Animal Hospital to do whatever is necessary should an emergency situation arise.
- Payment is required when animal(s) are released.

Signed _____

Pickup Times

Mon - Thus: 8:30 AM to 6:45 PM & Fri 8:30 AM to 5:45 PM

Sat - Sun pickup available **ONLY** with prior arrangements

Holiday hours may vary - for any questions check with admitting personnel