



Yearly Boarding Agreement

Thank you for Choosing Mile Creek Animal Hospital for your boarding needs.
We strive to provide compassionate care for your pet.

Owner Name(s): _____ Phone Number _____
Authorized Caregivers: _____ Phone Number _____
_____ Phone Number _____

Pets Name: _____ Sex: Female Male Spayed/Neutered
_____ Sex: Female Male Spayed/Neutered
_____ Sex: Female Male Spayed/Neutered

In order to protect the health of our patients, we require documentation showing that all boarding dogs have current Rabies, DA2PP, Canine Influenza, and Bordetella vaccines. Also a negative fecal and heartworm test within the past year is required.

All boarding cats are required to have documentation showing the status of their cats Leuk/FIV test as well as current FVRCP, rabies vaccine and a negative fecal in the past year.

We require that your pet(s) be on some type of flea prevention. All pets will be flea combed upon arrival and if fleas are found, the pet will be given a preventive at the owner's expense to control the fleas.

If any of your pets' vaccinations are past due, they must be inoculated before boarding according to AVMA standards. Pets that are too young to have completed their entire vaccination series may not yet be protected against those disease. Therefore, the owners accept any associated risks.

Diet

We have a variety of foods available to meet the nutritional needs of your pet. Our first choice, however, is for you to bring your pets own food from home. This is beneficial for your pets digestive system and it encourages them to eat while here.

Please indicate the food to be fed and specify whether your pet eats dry food only, canned food only, or both, and the number of times your pet is fed each day.

Pet _____ Food _____ Dry/Can/ Both
Frequency of feeding: am: _____ pm: _____ both: _____
Pet _____ Food _____ Dry/Can/ Both
Frequency of feeding: am: _____ pm: _____ both: _____
Pet _____ Food _____ Dry/Can/ Both
Frequency of feeding: am: _____ pm: _____ both: _____

Medications

If your pet will be receiving medication during his or her stay, it must be in the original veterinary-labeled container with instructions for administration.

Statement of Kennel Policy's

We strongly encourage you to bring something from home for your pet; a blanket, pillow, or toys will help your pet feel more at home.

1. A full days' board is charged on the second day and last days, no matter what time your pet released.
2. Pets need to be picked up by 5:00pm on day of dismissal or an additional day charge will be applied. If possible arrangements will need to be made for pick-ups when the office is closed.
3. We ask that you label toys, bedding, foods, treats, etc. brought with the pet so that the clinic can use these accordingly and return any unused/remaining items. Any items brought in that are not labeled may be marked appropriately with either a label or permanent marker.
4. When boarding we cannot guarantee the health of any animal, but we pledge to provide appropriate care to all boarders. I agree to hold this facility harmless for conditions that often are unavoidable in boarding environments, including but not limited to, weight loss or gain, rough hair coat, kennel cough, upper respiratory infection, diarrhea, and fleas.

Should injury or circumstance warrant the need for emergency service, I understand that the hospital will try to contact the necessary people and will initiate appropriate treatment until I can be reached. I agree to pay all such related expenses for medical treatment, the fees not to exceed \$_____.

_____ (Initial) As owner or authorized guardian of this animal. I give permission to Mile Creek Animal Hospital to receive, treat, prescribe or otherwise care for the animal above as deemed necessary.

_____ (Initial) I certify that my pet appears to be free of contagious disease and has not bitten anyone in the past ten days

I agree to make full payment at the time of discharge.. I accept that if I fail to pick up my pet(s) within ten days of notification at the above address, it will be considered abandoned and will be handled in accordance with state law, and that doing so does not relieve me of my financial obligations.

I have read the above and I am in full agreement.

Signature of Owner or Authorized Agent

Date