



# North Springs Animal Clinic

## Boarding Form

Patient's Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Drop off Date: \_\_\_\_\_

Pick Up Date: \_\_\_\_\_

For your pet's protection, all vaccines must be current. We require Distemper/Parvo, Rabies, Bordetella (kennel cough), and Influenza. Your pet should be free of internal and external parasites. If not, we reserve the right to treat your pet. The kennel is not responsible for any personal belongings left with your pet.

**Please check any additional services you would like while your pet is boarding:**

(Additional charges will apply)

- Bath (Includes: Brush, Nail Trim & Ear Cleaning) Date: \_\_\_\_\_
- Groom (Brush, Haircut, Nail Trim, & Ear Cleaning) Date: \_\_\_\_\_
- Extra Walk Daily
- Teeth Brushing Daily
- Teeth Brushing – only with Bath/Groom (DVM / Tech will discuss preventative oral care with you at Dismiss)
- Nail Trim (Clippers or Dremel)

**Food Instructions:**

- Feed In-house food (We use a low residue/low GI upset: Iams or Eukanuba)
- Brought food (additional charge will apply): Type: \_\_\_\_\_

Feed Daily: Once / Twice / Free Feed    Amount: \_\_\_\_\_    Fed Today: \_\_\_\_\_

**Medications** (additional charge will apply):

- |               |             |                    |
|---------------|-------------|--------------------|
| 1. Med: _____ | Dose: _____ | Given Today: _____ |
| 2. Med: _____ | Dose: _____ | Given Today: _____ |
| 3. Med: _____ | Dose: _____ | Given Today: _____ |
| 4. Med: _____ | Dose: _____ | Given Today: _____ |
| 5. Med: _____ | Dose: _____ | Given Today: _____ |

**Did you bring:**

Toys: \_\_\_\_\_    Blanket: \_\_\_\_\_

**Special Notes:** \_\_\_\_\_

**Is your pet currently taking Heartworm Prevention?** Yes / No    **Type:** \_\_\_\_\_

**Is your pet currently on Flea Prevention?** Yes / No    **Type:** \_\_\_\_\_

If a problem should arise with your pet while under our care, we need permission to treat your pet. We'll make every attempt to contact you about an incident.

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

Emergency Contact Name & Number: \_\_\_\_\_