

**MONTICELLO ANIMAL HOSPITAL
BOARDING ADMISSION FORM**

**The following vaccinations are required for boarding:
Dogs: Rabies, DHPPC, K9 Flu, Bordetella(every 6 months)
Cats: Rabies, FVRCP, and Feline Leukemia status must be known**

All pets are required to be free of fleas and ticks. They must also have a fecal sample examined for worms during the past 12 months. A medicine dispensing fee of \$5.00 per dose will be charged to boarding pets with medication on days in which the medical staff must come in after hours to give(wknds/holidays)

****Should any parasites be found, treatment will be performed and charged to the owner as well as any medical care deemed necessary by the veterinarian.**

BOARDING INFORMATION:

AM _____

TODAY'S DATE: _____ PICK UP DATE: _____ PM _____

EMERGENCY CONTACT NUMBER: _____

OWNER'S NAME: _____

PET'S NAME: _____

BELONGINGS:

COLLAR _____ LEASH: _____

BLANKET/BED: _____ TOYS: _____

OTHER: _____

FOOD/DIET: _____

MEDICATIONS: _____

ANY OTHER ADDITIONAL INFORMATION: _____

ADDITIONAL SERVICES WHILE BOARDING (CIRCLE ALL THAT APPLY):

Canine vaccines Fecal exam Heartworm test

Feline vaccines FELV test Grooming/bath

Physical exam Dental Nail trim

Authorization: I authorize Monticello Animal Hospital to board and care for the above named pet(s). Should a medical or emergency situation occur, I authorize whatever treatment is necessary and will remain fully responsible for the cost of all services provided.

SIGNATURE: _____