

## Boarding Admission Form

Pet Name(s): \_\_\_\_\_ Owner: \_\_\_\_\_

Date of Admission: \_\_\_\_\_ Expected Date of Discharge: \_\_\_\_\_

No Sunday pick-up available.

We supply dry and canned food, bedding, dishes, and litter pans. You may bring the food of your choice. Prescription diets must be supplied or purchased.

All dogs are walked outside three times daily. If you do not want your dog walked, please initial here:

\_\_\_\_\_

Please list any property left with your pet:  
(all property should be clearly marked with your name)

Food: \_\_\_\_\_

Bedding: \_\_\_\_\_

Carrier: \_\_\_\_\_

Collars, leashes: \_\_\_\_\_

Toys, bones: \_\_\_\_\_

Other: \_\_\_\_\_

If your pet requires medications or treatments, you may either supply medications or purchase them. Extra charges may apply to medicate your pet. Please indicate medications, treatments, or special instructions:

\_\_\_\_\_  
\_\_\_\_\_

If parasites are found on the pet during the stay, they will be treated as Singleton Veterinary Hospital determines, and the cost of the treatments will be added to the total bill.

While boarding at Singleton Veterinary Hospital my pet also needs:

Bath                      Flea / Tick Treatment                      Home Again Implant                      Toenail trim                      Clean Ears

Other: \_\_\_\_\_

In case of an emergency, the staff of Singleton Veterinary Hospital will make reasonable attempt to contact you or your designated representative. In the event you cannot be reached, you hereby give permission to the doctor and staff of Singleton Veterinary Hospital to perform treatment as deemed necessary. You will be responsible for any emergency charges at time of discharge.

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

Emergency Contact Number: \_\_\_\_\_ Other number: \_\_\_\_\_

Designated Representative: \_\_\_\_\_ Phone number: \_\_\_\_\_

**Payment is due at discharge. We accept cash, check, Visa, MasterCard, Amex, and Discover.**