

**Please Read Carefully Before Signing**  
**Boarding Admission Form**

Owner Name: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Pets Name: \_\_\_\_\_

Pick up Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

I understand my pet(s) **must be current on vaccinations** to board and if proof is not presented at time of check-in, then the vaccinations will be given, and I will be charged for these services. Also, I understand my pet **must be free of internal and external parasites (worms, fleas, ticks, etc.)** \_\_\_\_\_ (initials)

**If my pet becomes ill or an emergency arises**, I authorize Radford Animal Hospital to perform any treatment *medically necessary* for the health and comfort of my pet. **Every attempt will be made to contact me; however, services will NOT be withheld for conditions that warrant immediate attention. I will be financial responsible for the services rendered.**

Please perform the following procedures while my pet is boarding. Charges for these services will be added to the boarding fees:

\_\_\_\_\_

Would you like your dog bathed prior to being released? (Charge depends on weight)      Y or N                      Nail Trim?      Y or N

**Pet Pampering Packages are also available upon request:**

**Bedtime Package:**                      **\$11.00 per day**                      Qty. \_\_\_\_\_                      On days \_\_\_\_\_  
(1 bedtime snack, 1 brush out, and 1 bedtime story)

**Athletic Package:**                      **\$16.00 per day**                      Qty. \_\_\_\_\_                      On days \_\_\_\_\_  
(2 Playtimes, 1 Booda Bone, and 1 nutritious treat)

**Spoiled Rotten Package:**                      **\$22.00 per day**                      Qty. \_\_\_\_\_                      On days \_\_\_\_\_  
(2 Playtimes, 1 Booda Bone, 1 bedtime snack, 1 brush out, and 1 bedtime story)

**Cat Stroll:**                      **\$5.00 per day**                      Qty. \_\_\_\_\_                      On days \_\_\_\_\_  
(One 10-minute stroll in a personalized executive stroller)

Please list any medications your pet will need while boarding (**additional charges apply**):

Drug                      Dosage                      Times per Day                      Brought Meds(Y/N)                      Given Dose for today?(Y/N)

\_\_\_\_\_

\_\_\_\_\_

How would you like your pets boarded?      **TOGETHER**                      **SEPARATE**

**Feeding Instructions:**    Amount per feeding \_\_\_\_\_ Times per day \_\_\_\_\_ or    FREE FEED                      Own food?: Y or N    Brand? \_\_\_\_\_

**\*Radford Animal Hospital cannot assume responsibility for any items left with pet. All efforts will be made to return items to owner in the condition in which they were left. Whenever possible, please label items with pet's name and owner's name\***

Personal items: \_\_\_\_\_

**Signing this form acknowledges that I have read and understand all of the above information and agree to the above terms.**

\_\_\_\_\_  
Signature of Owner/Responsible Agent

\_\_\_\_\_  
Phone Number

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

Would you like to receive text message or pictures of your pet while here : Y \_\_\_\_\_ N \_\_\_\_\_ # \_\_\_\_\_

**IN AN EMERGENCY PLEASE CALL (We MUST have your number or a responsible contact):**

Name: \_\_\_\_\_

Phone#: \_\_\_\_\_