

# Rye Harrison Veterinary Hospital

170 North Street

## Boarding Admission Form

For the protection of all patients and boarders, any pet entering the hospital must have current vaccinations, must be free of external parasites such as fleas and ticks, and must have had a negative fecal sample (for internal parasites) within **6 months**. If these requirements are not current upon presentation for boarding, then the appropriate vaccine, fecal exam and/or parasite treatment will be performed at the owner's expense. We appreciate your cooperation in our continual efforts to keep your pet safe, healthy during his or her stay with us.

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

Owner Name & Address:

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

Home Phone: (\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_

Emergency Contact:

Expected Pick-Up Date

AM  PM

Pet's Name: \_\_\_\_\_

Breed: \_\_\_\_\_ Age: \_\_\_\_\_ Color: \_\_\_\_\_ Sex: \_\_\_\_\_

Please be advised that pick-up time is 12PM (NOON). If you pick-up after 12PM (NOON), you will be charged for the day. If your pet is having a bath or is being groomed on the day of discharge you will not be charged for that day's boarding.

### Diet

Which diet do you feed at home?

Have you provided your pet's food for boarding?  Yes  No

Will you pet be eating our food?  Yes  No

Feeding Instructions: \_\_\_\_\_

### Medical Boarders (additional fee applies)

Is your pet on any medication that must be administered while boarding?  Yes  No

If so, please list each medication along with directions.

Medication	Directions

All medicated boarders will be given a brief physical exam upon admission to and discharge from the hospital. The examination fee is included in the daily medicated boarder rate.

Additional Service Please check all that apply ( additional fees will be applied)

- Physical Exam       Vaccinations       Heartworm Test       Fecal Exam       Nail Trim  
 Bath: Regular       Bath: Medicated       Bath: Flea & Tick       Professional Grooming       Extra Walks

In the event that my pet becomes injured or ill while boarding I authorize the hospital to provide whatever treatment is necessary for my pet.

If sedation is necessary for treatment or handling, I give my consent to the hospital staff to administer such medications.

If my pet is admitted as a medicated boarder, I authorize the hospital staff to administer medications prescribed by the doctors. I understand that if the medication runs out while boarding it will be refilled by the hospital, at the prescribed cost.

I understand that the payment for service rendered is due upon discharge of my pet(s).

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