



BOARDING AGREEMENT

INITIALS:

_____ I certify that my dog/cat's **vaccinations** are *current* during his/her stay, to insure the safety of ALL pets under your care. If not, I *give permission* for North Star Veterinary Hospital to update my pet's vaccinations accordingly and all charges will be added to my bill upon check-out. (Proof of vaccination must be provided)

_____ For the protection of ALL pets boarding at North Star Veterinary Hospital, they will be administered a Capstar pill (\$4.50), to kill all active **FLEAS** and prevents reinfestation for 24 hours.

_____ I understand that all pets must be checked out **BY 12 pm** on their departure date in order to *avoid* being charged for that day.

_____ In the event your pet becomes injured or sick, every effort will be made to reach the emergency contact with information on symptoms, treatment options, and estimate of cost. If owner/emergency contact can't be reached and medical treatment is deemed necessary, I **authorize** North Star Veterinary Hospital to **provide medical care** to my pets and the charges will be added to my bill.

_____ I acknowledge that in some cases, pets may be susceptible to colitis (inflammation of the intestines/colon, causing symptoms such as diarrhea), when under stressful conditions, such a separation anxiety, nervousness, exposure to new environments, worms, etc.

I ** consent / do not consent** to an intestinal parasite screening (fecal) in the event that my pet presents signs of colitis to rule out cause by intestinal parasitism.

I** consent/ do not consent** for medication to be dispensed and administered to my pet in the event that he/she develops stress colitis during boarding.

Emergency Contact Information:

Name: _____ Phone: _____ Relationship: _____

Signature: _____

Date: _____

Boarding Agreement

Please tell us more about your pet:
(Daily Routine/Digger/Fence Jumper/Etc.)

What items did your pet bring on vacation?
(Blankets, Toys, Medications, Etc.)

Has your pet had any recent surgeries?

Yes No

Does your pet struggle to make friends?
(Dog/Cat Aggressive)

Yes No

Will your pet need to be fed kennel food?

Yes-\$3/day No. Own Food.

Comfort A La Carte Services:

Integrative Therapy
(Prices May Vary)

Extra 20 Min. of Play Time
\$2/day x _____

Daily Brushing
\$2/day x _____

Nail Trim - \$14

Anal Gland Expression - \$15

Grooming:

Basic Spa - Prices May Vary
(Includes a bath, nail trim, anal gland expression, and ear cleaning.)

Full Spa - Prices May Vary
(Includes a Haircut/Deshed + Basic Spa)

Client Signature: _____

Date: _____