

Arrive Date:	Pick Up Date:	
Client Name:	Patient Name:	
Breed:	Sex: Color:	
Meds, toys, food, etc.)	AT CHARGE OF \$ 25 DED MED ADDITION	TANI 🕹 🌣
** THERE IS AN ADDITION.	AL CHARGE OF \$.65 PER MED APPLICAT	ION **
Emergency Contact and Phone Nun	nbers:	
	VACCINATION POLICY	
Bordetella in order to be admitt	accinations: DA2P/FVRCP, Rabies, K9 In ed to the hospital for boarding. This ens ctious diseases that can be transmitted in please	ures that
	CONSENT TO TREATMENT	
	your pet while he/she is here boarding:	
CONSENT to emergency treatment	nt (sign):	
DECLINE any medical treatment	(sign):	
	BATHING	
	f discharge. Charges are based on the weight of gn):	
DECLINE a bath at discharge (sig	m)•	
	to discharge, pick-up time is AFTER 2:0	00 P.M.
	Ze, protein the transfer of th	
	es for clean-up baths will be added (initia	l, please)
Pick up begins at 9:00AM o	n specified day!	
	D. A. WITE	
TONIA TELEPE	DATE:	
IGNATURE:		
IGNATURE:		