



great pets deserve great care

**Boarding Consent Form**

Client ID:

Date In:

Date: Out:

Owner:

Patient Name:

Additional Pets:

All animals boarding at Craig Road Animal Hospital are required to have proof of current vaccinations. **Dogs** must be vaccinated for Distemper / Parvovirus annually, Bordetella every six months, Rabies and a current intestinal parasite / fecal test. **Cats** must be vaccinated with an upper respiratory combo vaccine and against feline leukemia annually, Rabies and a current intestinal parasite / fecal test.

We only except vaccines given by a licensed veterinarian, all others will be void. **These are minimum vaccination requirments and are necessary for the safety of all animals, and staff, at Craig Road Animal Hospital.**

How often, and how much, should we feed your pet?

Any procedures / grooming / bathing while boarded?

Will your pets be sharing a kennel?  
(Pets sharing kennels cannot be seperated for feeding.)

Yes  No

Webcam access for an additional fee (dog suites only)?

Yes

Does your pet have any medical issues?

**PETS THAT ARE NOT PICKED UP BY 10:00PM WILL BE CHARGED FOR AN ADDITIONAL DAY.**

I understand that all precautions will be used against injury, escape, or death of my pet. The hospital and staff will not be held liable for problems that develop, provided that reasonable care and precautions have been followed. I grant permission for any necessary vaccines that are required by Craig Road Animal Hospital and any emergency treatments needed while my pet is boarding. I understand that I am financially responsible for all charges that are acquired for treatments preformed to my pet. I understand that all payment in full is required at the time of pick-up for all services rendered during my pets stay. If my pet is found to be aggressive and / or dangerous to the staff or other animals, I will make arrangements to pick-up my pet immediately and all financial costs will be my responsibility. I understand that all pets not picked up w/in 10 days after the expected date of pick-up will be considered abandoned. **Craig Road Animal Hospital is not responsible for any personal items that are lost or destroyed while boarding. We recommend not leaving any items here.**

Owners Signature:

Emergency Contact Number(s):

\*\*\*\*We do not provide after business hours pickup or discharges for boarding or hospitalized pets\*\*\*\*

Date In:	Date: Out:	Emergency Number:
Any changes to my or my pet's information:		<input type="text"/>

Date In:	Date: Out:	Emergency Number:
Any changes to my or my pet's information:		<input type="text"/>

Date In:	Date: Out:	Emergency Number:
Any changes to my or my pet's information:		<input type="text"/>

CRAH Staff Use:  Rabies  Rabies IMRA  Distemper / Parvo  Bordetella  Fecal  Upper Resp.  FELV  Other