

Crown Veterinary Hospital
817 Orange Ave. Coronado, CA. 92118
(619)-435-6624 Fax (619)-435-6715

Boarding Release Form

Please take a moment to complete this form so that we may better serve you and your pet.

Client Name: _____ Pet Name: _____ Age: _____ Breed: _____

Today's Date _____ Pick Up Date _____

Dates of last vaccinations:

Canine

Distemper/Parvo/Corona _____

Rabies _____ 1 year or 3 year

Bordetella _____

Fecal _____

Feline

FVRCP _____

Rabies _____

Leukemia _____

Fecal _____

Pet(s) on flea preventative? _____ yes _____ no

What kind? _____ Date last administered _____

Dog(s) on heartworm preventative? _____ yes _____ no

What kind? _____ Date last administered _____

Would you like your pet bathed while boarding _____ yes _____ no

Pets visiting for 7 or more days will receive a complimentary bath. Bathing fee is based on weight. Pets who become excessively soiled will receive baths as needed. There will be a charge for pets who require multiple baths.

Please list any medications that your pet is taking and the dose _____

List Diet and Feeding Instructions _____

List any other special instructions _____

List ALL items you are leaving with your pet (*We are not responsible for lost items*) _____

Do we have permission to treat medical problems, such as ear and skin infections, that may be found during the

Boarding Exam? If yes, up to what amount? \$ _____ yes _____ no

Would you like us to call you with our findings? _____ yes _____ no

REQUIREMENTS FOR BOARDING

1. All animals must be current on core vaccinations and have a negative fecal within 1 year from boarding date.
2. All animals must be free of parasites (ex. ticks, fleas, worms etc.), or they will be treated at owner's expense.
4. If a tranquilizer is necessary for treatment or handling, Crown Veterinary Hospital has my permission to administer such medication.
5. Animals with loose stool due to parasites or stress will be treated at owner's expense.
6. All animals must have received an examination at Crown Veterinary Hospital within one year. Otherwise an examination will be done while boarding at the current exam fee of \$50.00.
7. **Crown Veterinary Hospital has my permission to do whatever is necessary should an emergency arise up to \$ _____.**

I have read the boarding requirements and understand the hospital's policies.

Signature: _____

Contact phone number(s): _____

List emergency contact(s) and number(s): _____