

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: _____

Name: _____

Today's Date _____ Pick Up Date _____

Dates of last vaccinations:

Distemper/Parvo/Corona _____ Bordetella _____

Rabies _____ 1 year or 3 year _____

Feline Distemper _____ Leukemia _____

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(s) bathed while boarding _____ yes _____ no

Pets visiting for 7 or more days will receive a complimentary bath. Bathing fee is based on weight.

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

If your pet is on a special diet please list the name of the diet and amount to be fed _____

List any other special instructions _____

REQUIREMENTS FOR BOARDING

1. All animals must be current on all vaccinations.
2. All animals must be free of external parasites (ex. ticks, fleas, etc.), or they will be treated at owner's expense.
3. **Crown Veterinary Hospital has my permission to do whatever is necessary should an emergency arise up to \$ _____.**
4. If a tranquilizer is necessary for treatment or handling, Crown Veterinary Hospital has my permission to administer such medication.
5. 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 \$43.00.

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

Signed : _____

Contact phone number/s _____

List emergency contacts and numbers _____