

## **BOARDING ADMISSION**

Admission Date	Pick up date		
Feeding instructions: In Hospital Food Y/N Quantity Frequency_ Ok to give treats Y/N	Special instr	ructions	_ Food Allergies
<b>Medical Care instructions:</b> Chronic Illness or Medical Illne	ess please list		<u>-</u>
Medication	Dose	_ How often	
Medication	Dose	_ How often	
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All medication must be provi	ided in its original	container that	includes a prescription label.
<b>Flea and Vaccine Policy:</b> All of our boarding animals are your pet, a veterinary approve	_	_	ve. If we find an active flea infestation on an additional cost.
Kind of flea treatment used		Date applied	l
	d Rabies (both)vacci	ines. If there is a	ired to be current on their Bordetella (dog) a medical exemption to vaccines due to an
Express anal glands(\$ Nail Trim(\$18) Bath(\$48.50) Bath, Nail Trim, Express anal g Flea Control(Cost) Additional 15min Walk/Playtin	528) lands (\$55 me(Cost/da	.00) ay)	while your pet stays with us:
Any issues we should be aware	of (anxiety, fear, ag	gression, etc.?)	

Number they can be reached while boarding
If you are unable to be reached, emergency contact
Do you wish for boarding updates $\mathbf{Y/N}$
Email
Phone number for text message

Mountain View Veterinary Hospital will use all precautions against injury, illness, or death of my pet. Mountain View Veterinary Hospital will not be held liable or responsible in any manner whatsoever, or under any circumstances in connection therewith.