

BOARDING CHECK IN

706-507-7297 2ndavenuevet.com

PATIENT INFORMATION



Patient Name _____ Client Name _____

Arrival Date/time _____ Departure Date/time _____

EMERGENCY CONTACT: Name _____ Phone _____
This person has the authority to make all decisions related to this pet's medical care when the client cannot be reached.

INSTRUCTIONS: Diet _____ Dry Canned Supplied by: Client Clinic
Feeding Instructions _____ Begin AM PM

- Yes No Bath prior to discharge? **SPECIAL:** Complimentary bath after day 4
- Yes No I would like a Kong while boarding, to take home later
- Yes No Would you like any veterinary services performed during your pet's stay?
If so, please list: _____
- Yes No Boarding in same non-suite enclosure as another pet? If yes, please fill out additional *Multi-pet Housing Auth. Form.*
- Yes No Medication Administration Required?
Med: _____ Instructions _____ Begin AM PM
Med: _____ Instructions _____ Begin AM PM
Med: _____ Instructions _____ Begin AM PM

Personal items?

- _____ I acknowledge that 2nd Avenue Animal Hospital is "flea free" boarding facility. Your pet will be treated with a one-time 24-hour flea treatment at the owner's expense.
- _____ I acknowledge that the boarding checkout time is at 3pm each day, and if I check my pet out after 3pm, then I will be charged a late pick-up fee on the day of checkout. Checkout prior to 3pm will result in no-charge for the day of checkout.
- _____ I acknowledge that proof of vaccinations that meet the standards for sufficient protection in a commingled boarding environment are required. If proof is not provided, doctors of 2AAH will administer necessary vaccines, including required physical exam, at the owner's expense.
- _____ Photo and video release: We love to post pictures and videos on social media. The owner agrees to allow 2AAH to use pets' name, any images, or any likeness.
- _____ I would like my pet to be groomed by Claudia (35lbs and Under) BY APPOINTMENT ONLY

Dogs (over 16 weeks)	Must be current on Rabies (1 dose), Distemper/Parvo (2 doses), Leptospirosis (2 doses), Bordetella (1 every 6 months)
Puppies (12 weeks)	Must be at least 12 weeks of age and have received Rabies, Distemper/Parvo (2 doses), Leptospirosis (1 dose), Bordetella (1 dose)
Cats (over 16 weeks)	Must be current on Rabies (1 dose), FVRCP (2 doses), Leukemia Vaccine
Kittens (12 weeks)	Must be at least 12 weeks of age and have received FVRCP (2 doses)

If we are unable to contact you, I grant 2AAH permission to treat as follows:

Treat minor issues (ear/skin/eye infections, diarrhea?) Yes or No (until reached)

\$ _____ Max amount authorized.

Any emergency procedures? Yes or No (until reached)

\$ _____ Max amount authorized.

Best way to contact: Cell Phone: _____ Text Email: _____

Print _____ Sign _____

Date: _____

Charges for services, medications, and supplies are due upon discharge. Payment can be made by cash, check, or credit card.

If you neglect to pick up your pet or contact us to extend boarding stay and we are unable to contact you with reasonable effort, pets are considered abandoned after 10 days. If abandoned, we reserve the right to make arrangements for the pet as we deem necessary. I release 2AAH from all liability and have read and do understand this form.

Download this form, fill it out and e-mail it to 2ndavenuevet@gmail.com or print it and bring it in with you to your appointment.