

Green Country Veterinary Hospital

Canine Boarding

(PLEASE NOTE THAT GREEN COUNTRY VETERINARY HOSPITAL IS UNABLE TO RECOGNIZE THE 3 YEAR RABIES VACCINE FOR BOARDERS DUE TO GLENPOOL CITY ORIDANCE REGULATIONS)

Owner: _____ **Pet:** _____ **Date:** _____

Does your pet need to be seen by the Doctor while they are staying with us? If yes, please indicate what they need to be seen for..

Is your pet aggressive towards people or other animals? YES or NO
If yes, please indicate how *(If they are aggressive towards people, please talk to the Receptionist or Technician. There is an additional cost for aggressive pets.)*

Would you like for your pet to have a bubble bath before going home?
YES or NO

(If you would like a bath, please check availability first to make sure that your pet will be ready/dry when you pick up.)

Has your pet been treated for fleas and ticks in the past 30 days?
YES or NO

If your pet is found to have fleas or ticks upon arrival we will apply a topical flea and tick prevention for the safety of our patients. (charges will be applied to your account)

Would you like for your pet to have anxiety medicine (Anxitane) while boarding? *There is an additional charge of \$5.00 per day for this tablet.*
Yes or No

What is your pet eating?

We feed Science Diet Sensitive Stomach while they are here unless you bring your own food. If they are on a special diet and you did not bring the food, we can simply add a bag to your boarding fee.

Is your pet on any medications? YES or NO

If yes, please list the medications and frequency that they are given:

Are there any concerns or questions that you need addressed at this time?

One of the advantages of boarding your pet at a Veterinary Hospital is that veterinary attention is readily available should the need arise. If the need arise, we will call the emergency number listed below. If no one can be reached, please indicate your wishes below should your pet require medical treatment. Please choose one of the following.

_____ Please perform whatever services the Doctor deems necessary for the best possible care of my pet.

_____ I authorize up to \$100.00_____, \$250.00_____, Other \$_____ in medical care until someone can be reached.

_____ Do not administer any medical treatment until specific authorization is given.

Please take all blankets, toys, collars and leashes with you. We will provide your pet with all the comforts that are needed here. Also we want to ensure that you and your pet have all their belongings and nothing is lost or destroyed.

While your pet is here, they will be walked a minimum of three times a day. We will feed in the a.m. and in the p.m. We will make sure that they have a comfy bed and fresh water. All of our guests will remain inside, so that they do not get hot, cold, or wet. We do not allow our guests to mix and mingle, since some like their space and do not want to share. We promise to give them tons of love and pet them.

Additional walks can be requested at a cost of \$5.00 per additional walk. Additional love at no cost.

Signature _____
Emergency contact/number _____

***I authorize GCVH to administer the following vaccinations/lab work while _____ is at the facility boarding:*

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-
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Signature