

Boarding Information Form

Client Name: _____ Pet Name: _____

Canine Feline Other : _____

Check In Date: _____ Check Out Date: _____

Do you administer a flea preventative? Yes No

Name of preventative: _____

Date Last Administered: _____



**Arlington Heights
Animal Hospital**

Feeding Instructions:

We feed Purina ProPlan EN (or a similar high quality food) to pets while boarding. You may use our food or bring your own. Will you be providing food for your pet while boarding?

Yes No

Please fill out feeding instructions whether bringing your own food or using ours:

Name of Food:	Amount:	Frequency:	Last Time Fed:

Medication Instructions:

Is your pet on medication?: Yes (if yes, you must complete section below) No

NOTE: There is a daily charge of \$4.00 for administering medications while boarding.

Medication:	Directions:	Last Time Administered:

Please complete form on other side →

Additional services requested during stay:

NOTE: We can do these extra services during your pets stay for an additional charge. Services will be performed the day before go home date.

Fecal Urine Test Ear Cleaning Nail Trim Anal Gland Expression

Other : _____

If your **dog** is boarding with us for **more than one night**, a complimentary bath will be done the day before the scheduled release date.

Complimentary Bath NO Bath

Please list any items brought with your animal today:

Sign: _____ Date: _____