

**BOARDING AGREEMENT**

**FAIRFIELD ANIMAL HOSPITAL**

15040 Fairfield Village Drive, St. 100  
Cypress, TX 77433  
Telephone: (281) 256-3150

Today's Date \_\_\_\_\_ Date of pick-up \_\_\_\_\_  AM  PM

Owner \_\_\_\_\_

	<u>Bathe</u>		<u>Medications</u>	
	YES	NO	YES	NO
Pet(s) Boarding _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Person(s) to contact in case of emergency \_\_\_\_\_

Emergency telephone number(s) \_\_\_\_\_

Pet's belongings (Carrier, Toys, etc.) \_\_\_\_\_

Special instructions—Include detailed medication directions, feeding instructions, and anything you want the doctor to examine:

\_\_\_\_\_

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**FOR YOUR PET'S HEALTH**

**VACCINATION POLICY**

To insure the protection of all pets under our care, the following must be up-to-date

DOGS	_____ Rabies	_____ DHPP	_____ Bordetella	_____ Fecal
CATS	_____ Rabies	_____ FVRCP	_____ Felv	_____ Fecal

If not up-to-date, or unable to provide proof of vaccination, I give permission to update my pet's vaccination in accordance with the above policy.

In addition, if any fleas/ticks are observed on your pet while boarding, they will receive a flea/tick treatment at the owner's expense.

**MEDICAL ILLNESS POLICY**

One of the advantages of boarding your pet at a veterinary hospital is that veterinary attention is readily available should the need arise. If your pet becomes ill, we will call the emergency number(s) listed above regarding your pet's symptoms, treatment options and estimate of additional costs. If no one can be reached however, please indicate your wishes below should your pet require treatment to relieve immediate discomfort or to resolve an important medical condition.

\_\_\_\_\_ Please perform whatever services the doctor deems necessary for the best care of my pet until someone can be reached. This includes only non-elective treatments and necessary diagnostics.

\_\_\_\_\_ I authorize up to (check one and indicate amount)  \$ \_\_\_\_\_  \$100  \$200 in medical care for my pet until someone can be reached.

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

**SPECIAL CONSIDERATIONS:**

Occasionally some boarding pets may bark excessively which can be disruptive to the hospital environment. To lessen anxiety among both boarders and hospitalized patients, boarded pets that bark excessively may be given an oral tranquilizer at the doctor's discretion.

I have read and understand this agreement. I fully intend to pick up my pet(s) on the above specified date. If circumstances change, I will notify the veterinarian of a new pickup date.

\_\_\_\_\_ Date

\_\_\_\_\_ Owner / Agent for Pet(s)