

**BRETON VETERINARY HOSPITAL
CANINE DAILY BOARDING ADMISSION FORM**

Client Name: _____ Pet Name: _____

Check in: _____ Check out: _____

Phone Numbers: _____

(\$15/day extra if in heat / \$5/day extra if positive for intestinal parasites)

1 st Dog	2 nd Dog in SAME cage	VIP Package
_____ under 20 lbs. -- \$25.00	_____ \$20.00	_____ \$70.00 Includes: board, playtime or hike, CET Chew, Frosty Paw, Toothbrushing, Brushing, Exit Bath & Nail Trim
_____ 20-49 lbs. -- \$27.00	_____ \$22.00	
_____ 50-99 lbs. -- \$30.00	_____ \$25.00	
_____ 100+ lbs. -- \$33.00	_____ \$27.00	_____ \$50 Additional Pet
_____ Doggie Daycare -- \$22		

ISOLATION BOARDING ALL SIZES _____ \$45.00

NOTE: Boarding pets are always charged a full day on the arrival date, regardless of the check-in time. If the pet is picked up **BEFORE 12 PM**, there is no charge for that day. There are no pick-ups on Sunday or Holidays, since the office is closed. Check In Time is from 9 AM until 5 PM Monday, Tuesday, Thursday and Friday and 9 AM until 12 PM Wednesday and Saturday. Check Out Time must occur by 5:30 PM-Mon, Tue, Thur & Fri, 1:30 PM-Wed and 12:30PM-Sat. **If exit baths are requested, pick-up is after 3:30 PM, except Wednesday & Saturday as they are BVH's early closure days.**

FEEDING SCHEDULE

Feed Own Brand: _____

Feed Kennel Food: _____

Feeding Instructions: _____

*Boarders that run out of food from home will be provided kennel food or the Hills prescription diet food recommended

EXTRA SERVICES/TREATS

- _____ Playtime (15 minute sessions in K-9 courtyard) -- \$11/session... _____ \$8.00 additional pet
- _____ Nature Hike (30 minutes) -- \$20/session
- _____ Toothbrushing -- \$4/daily
- _____ Daily Brushing (15 minute session) -- \$7
- _____ CET Chew -- \$3
- _____ Frosty Paw -- \$2.50
- _____ Exit Bath (sm--\$33.70, med--\$39.83, lrg--\$48.53)...Pickup 3 p.m.

SPECIAL CARE

Oral Medications -- \$3.30/per dose

Injections -- \$5/per dose

1. _____ Dose _____
2. _____ Dose _____
3. _____ Dose _____

1. _____ Dose _____
2. _____ Dose _____
3. _____ Dose _____

Belongings: _____

Breton Veterinary Hospital
BOARDING ADMISSION FORM

ClientName: _____ Pet Name: _____

Check in: _____ Check out: _____

Phone Numbers: _____

For your pet's protection, all animals admitted to our facility **MUST** be current on the below vaccinations (given by a veterinarian) and free of external and internal parasites **ANY PETS FOUND TO HAVE FLEAS UPON ADMISSION WILL BE TREATED IMMEDIATELY AT THE OWNERS EXPENSE.**

Dogs:

Rabies

DHPP

Bordetella...within 6 months
(if **first time** vaccination or **overdue** by
one (1) month must go in isolation for
seven (7) days, at an additional cost)

Fecal...*within 6 months*
CIV

Cats:

Rabies

FVRCP

FELV (if not vaccinated against feline leukemia the
cat must be tested, at owner's expense, and be
negative for this disease...if the cat is positive,
may stay in isolation, at an additional cost)

Fecal...*within 12 months*

Services you would like provided while your pet boards with us. If your pet is getting a bath, pickup time is after 3pm that day.

A courtesy examination will be given to your pet by one of our veterinary assistants upon admission. Our doctor will be alerted to any problems found. If problems are found that do not require immediate attention:

_____ I give the doctor(s) permission to examine my pet and treat the problem(s) up to \$ _____

_____ I would like to schedule an appointment with the doctor upon my return

Should my pet become ill during boarding:

_____ I authorize Breton Veterinary Hospital to provide medical care up to \$ _____

_____ I would like to be contacted before any medical care is provided.

In the case of emergencies, Please do provide CPR for my pet _____
Please **DO NOT** provide CPR for my pet _____

OWNER RELEASE

You are to use reasonable precaution against the injury, escape, or death of my pet. The clinic and staff will not be held liable for any problems that develop provided reasonable care and precautions are followed. I fully understand that my pet must be current on all vaccinations for the safety of not only my pet, but for the safety of the other animals in the hospital. I understand that I am welcome to leave my pet's personal belongings; however, Breton Veterinary Hospital cannot assume responsibility for items lost or damaged. I also understand that if I fail to pick up my pet(s) within 5 days of the discharge date, my pet(s) will be considered to be abandoned and will be handled in accordance with Maryland State Law. This does not relieve me of my financial obligation.

Signature

Date