

The Montrose Veterinary Clinic Boarding Form

Patient name: _____

Client name: _____

My pet will be boarding from _____ until _____

Phone number(s) or email where you can be reached: _____

Medical Services (See Drop-Off Form):

Grooming Services: Bath Express Anal Glands Nail trim Brush Out Clean Ears
Bath request details:

Additional Services: Play Time (15 minute sessions - \$10 per session) _____ per day

Feeding: Kennel Maintenance Own Food

Quantity: _____

Frequency: _____

LIST ANY MEDICATIONS TO BE GIVEN (ALL MEDICATIONS MUST BE IN THE ORIGINAL CONTAINER)

Additional Notice for Boarding Pets: Any emergency situation that may arise will be treated by one of our doctors. There are also non-emergency situations that may arise during boarding that require medical attention such as stress-induced diarrhea, or other conditions not noticed by the owner that may jeopardize the pet's welfare. **Please select one of the following:**

- I authorize The Montrose Veterinary Clinic to perform necessary non-emergency medical treatment should the need arise.
- Please contact me before any non-emergency treatment is provided for my pet (understanding that your pet will not be treated until you are reached).

Please list any personal belongings:

The Montrose Veterinary Clinic is not responsible for damage to personal belongings caused by your pet or for the cleaning of items soiled by your pet. We are not responsible for lost toys, towels, bedding, collars, or leashes.

Montrose Veterinary Clinic is a "flea free" boarding facility. If live fleas or ticks are found, an additional treatment will be administered at the owner's expense.

Signature: _____ Date: _____

ALL FEES ARE DUE AT THE TIME OF CHECK-OUT.