



BOARDING FORM

BOARDING FOR: DAY CARE / HOLIDAY BOARDING / IN-PATIENT/INFECTIOUS/POST-OP

Drop Off Date:

Time: AM PM

Pick Up Date:

Time: AM PM

Pet's Name: _____ UHID No: _____ Species: ☐ Dog ☐ Cat

Breed: _____ DOB: Sex: ☐ Male ☐ Female

Owner's Name: _____

Address: _____

E-mail: _____ Contact No:

Any other contact no (family & friend)

Spayed ☐ Neutered ☐ Intact ☐

Food brand/fresh food _____ Food Amount _____ Times daily _____

Allergies or restrictions _____

Is your pet on medication? (List meds and doses): 1. Name _____ Dose _____ Duration _____

2. Name _____ Dose _____ Duration _____ 3. Name _____ Dose _____ Duration _____

Has your pet been boarded before (Where and when) _____

Any special instructions: _____

In your absence, do you authorize emergency care to stabilize your pet ☐ Yes ☐ No

Owner's property:

Neck Collar ☐ Colour _____

Feed provided by owner ☐ Yes Qty: _____ Brand: ☐ No

Additional Authorized Work

☐ Lab test ☐ Vaccination ☐ Nail Trimming ☐ Ear/Anal Gland Cleaning ☐ Shampoo/Medicated bath ☐ Dental Scaling

PLEASE STICK TO CHECK IN-OUT TIMINGS

Doctor use only

Parameters to record at the time of Boarding: Weight _____ Temperature _____

Parameters to record at the time of Discharge: Weight _____ Temperature _____

Temperament _____ Has your dog ever bitten anyone? _____

Presence of Ticks/Fleas _____ Presence of Rashes _____

Urination _____ Defecation _____ Any other abnormality/suggestion _____



REQUIREMENTS/INFORMATION FOR BOARDING

- Pet need to completely vaccinated and dewormed and must have been recorded by the concerned veterinarian.
- If found with external parasites, pet will be treated at owner's expense.
- Bitches and Queens on heat, puppies and kittens less than 4 months of age and aggressive pets will not be given admission for boarding in kennel / cattery.
- If a tranquilizer is necessary for treatment /handling, the hospital has the permission to administer such medication.
- If the pet becomes ill or if the state of animal's health otherwise requires any medical attention, is sole discretion of hospital to give whatever necessary treatment is to be given and expenses thereof shall be paid by owner.
- Owner of the pet can provide packaged food only. (left over food would be returned at the time of discharge).
- No outside bedding's are allowed. Bedding will be provided to your pet at no additional charges.
- Do not leave any belongings such as toys, leash etc. with the pet.
- Boarding fees starts from the date of admission.
- Payment needs to be made in advance along with one day's fees as security.
- Any extension in stay is to be confirmed via mail or SMS.
- In case of unclaimed pet, within two weeks of over stay will be put up for adoption.
- Visiting time _____.
- Please stick to check-in and check-out timings _____.

Note:- Kennel cough vaccination given minimum 72 hours before is compulsory for boarding

I have read the boarding requirements and understand the hospital's policies. The hospital has my permission to do whatever is necessary, should any emergency arise.

Signature of owner

DISCHARGE RECORD

I have received my pet with all records/belongings and the pet is physically fit.

Signature of Doctor on duty

Signature of owner