

**EMERGENCY INFORMATION AND INSTRUCTIONS FOR BOARDING PETS
AT THE WATERTOWN ANIMAL HOSPITAL
A New Boarding Sheet Is Required For Each Visit.**

Owners Name: _____

Home phone: _____ Cell phone: _____

Emergency contact name: _____, phone # _____
(If you are unable to be reached in an emergency situation)

Name of individual picking up pets from boarding:

Date/Time of admission to the boarding kennel: _____, Date/Time of pick up: _____

Please list any medical problems that your pet may have at this current time:

*For giving medications/vitamins while boarding, there is a \$7.50 fee for each treatment. (*Please enclose all medications in original containers).

*For treatments involving handling of the animal (treatment of ears, giving insulin, etc.) there is a treatment fee of \$25.00 per treatment.

*Extensive treatment (treating ears, soaking feet, etc) fee will be at the discretion of the D.V.M. with a minimum of \$25.00 per treatment.

*If internal parasites are found on my pet during this stay, he/she will be treated with a broad-spectrum dewormer at the above owner's expense.

*If fleas are found on my pet during this stay, a dose of Advantage flea control will be applied at the above owner's expense.

*If your pet soils itself during this stay, he/she will be bathed at the above owner's expense. The prices of the Baths are: Dogs less than 30 lbs. \$41.50. - and Dogs over 30 lbs. - \$68.00.

- If my pet requires medical attention during this stay, I authorize the Watertown Animal Hospital to treat, prescribe for, and/or perform surgery. The veterinarians also agree to make an effort to contact me prior to any action. There will be fees for any/all services.
- I have read, understand, and agree to all policies as listed above.

Signature: _____

Date: _____

Over

PLEASE NOTE: If food is not provided by the owner, we feed our canine friends Purina EN dry/canned. For our feline friends we feed Hills dry hairball and/or canned Purina UR. If you wish for your pet to be fed a different food, please provide it at time of admittance.

Pets Name	Daily Diet	Amount of Food and When Fed	Medication	Amount/Dose	Frequency/Time Given	Last Given?
	Home Diet [] Clinic Diet []	AM: PM: Leave food out []	_____	_____	_____	_____
	Home Diet [] Clinic Diet []	AM: PM: Leave food out []	_____	_____	_____	_____
	Home Diet [] Clinic Diet []	AM: PM: Leave food out []	_____	_____	_____	_____
	Home Diet [] Clinic Diet []	AM: PM: Leave food out []	_____	_____	_____	_____
	Home Diet [] Clinic Diet []	AM: PM: Leave food out []	_____	_____	_____	_____

List of bedding and/or toys brought today:

For dogs only....at owners expense... Bathe before going home: Yes [] No []

*New York State law now prohibits the use of automatic dryers on animals.

If we bathe your dog, we have to schedule a pick up time after 2pm on Monday- Friday after 2pm or Saturday at 12pm.

The prices of the Baths are: Dogs less than 30 lbs. \$41.50. - and Dogs over 30 lbs. - \$68.00.