

Boarding Consent

Owner:

Pet:

Address:

Date of Admission:

Home Phone:

Discharge Date:

Species:

Breed:

Sex:

Color:

Procedures to be done:

Medications to be given:

Items left with pet:

*****Pets will be up to date on required vaccinations or brought up to date upon arrival at the clinic. These vaccinations shall have been given or will be given by a licensed veterinarian. These vaccinations include: DOGS - Rabies (puppies within 1 year, adults within 3 years), DHLPP- CV (within 1 year), Bordetella (within 6 months), Canine Influenza (within 1 year). CATS - Rabies (kittens within 1 year, adults within 3 years), FVRCP (within 1 year). FERRETS - Rabies and Distemper (within 1 year). BIRDS, GUINEA PIGS, RODENTS, REPTILES - no requirement.

*****Your pet must be free from internal and external parasites. If not, treatment will be done at owner's expense.

It is our intent to make this a pleasant and a safe stay for your pet. However, illnesses and accidents can occur at any time. We promise to make every attempt to contact you using the emergency numbers provided should a problem develop. In the interim, we will treat your pet as we would treat our pets in similar circumstances. By signing below, you acknowledge financial responsibility for such treatment, less professional services by the doctor and staff. Such services are part of the boarding and grooming here.

In case of emergency, contact:

Phone:

By my signature below:

1) I agree that if any unpaid balance is assigned to a third party collection agency for collection or placed with an attorney to obtain judgment or otherwise satisfy payment of this account, a collection fee equal to 33% of the unpaid balance will be added to my account and I agree to pay that fee.

2) I agree that I will pay reasonable attorney fees and court costs if a judgment is granted against me.

3) I authorize ANIMAL MEDICAL SERVICES and any of its agents to contact me by telephone, at any of the numbers provided including any wireless number for me and/or my spouse, which could result in charges to me. I acknowledge that I may also be contacted by sending text messages, and emails, using any email addresses provided. Furthermore, I also authorize methods of contact which may include using pre-recorded and/or artificial voice messages and/or automatic dialing devices, as applicable.

Signed (owner or agent of the owner)

Date: