

Boarding Agreement

Receptionist Initials: _____

Leon Valley Veterinary Hospital
6701 Bandera Rd.
San Antonio, TX

Time: _____

Drop Off Date: _____ Pick Up Date: _____ AM/PM

Owner: _____

Any dog boarding for more than 7 days (or 168 hours) will receive a free bath. (We will not bathe aggressive animals.)

<u>Pets Boarding</u>	<u>Bathe</u>	<u>Medications</u>	**When we have to medicate your pet while boarding there will be an additional charge according to the frequency of treatment**
_____	Yes/No	Yes/No	
_____	Yes/No	Yes/No	
_____	Yes/No	Yes/No	
_____	Yes/No	Yes/No	

Emergency Contact(s): _____ Phone # _____

Items left with Pet(s): _____

Special Instructions: _____

FOR YOUR PETS HEALTH

VACCINATION POLICY

To insure the protection of all pets under our care, the following must be up to date:

DOGS: Rabies: DHPP: Lepto: Bordetella: Flu: Fecal: HW chk:

CATS: Rabies: FVRCP/FeLV: Fecal:

If not up to date or unable to provide proof of vaccination, I give my permission to update my pet(s) vaccinations in accordance with the above policy.

In addition, if any fleas/ticks are observed on your pet(s) while boarding, he/she (they) will be treated at owner's expense.

If your pet(s) become ill, we will call the emergency number(s) listed above regarding your pet's symptoms, treatment options and estimate of additional costs. If no one can be reached however, we will perform whatever services the doctor deems necessary for the best care of your pet until someone can be reached.

If I neglect to pick up my pet within 5 days of the date above, you may assume that the pet is abandoned and you are hereby authorized to dispose of the pet as may be deemed necessary.

Pets are released only during regular office hours Monday- Friday 7:00am- 6:00pm, and Saturdays 8:00am- 3:00pm. If pick-up date is the day after a holiday then pick up time is after 12:00pm.

Payment is due in full when pets are released from the hospital.

I have read and understand this agreement. I fully intend to pick up my pet(s) on the above specified date. If circumstances change, I will notify the hospital of a new pick-up date.

DATE: _____

SIGNATURE: _____