

Centreville Animal Hospital
13663 Lee Highway Centreville, VA. 20121
Boarding Agreement Form

Last Name: Pet's Name: File #:

Breed: Color: Weight:

Arrival Date: Departure Date: Departure Time:

(must be after 3 pm if a bath is given)

Emergency Contact Info:

If the doctor needs to reach you while your pet is in our care, what would be the best way to contact you?

_____ (o cell phone, o hotel number, o e-mail, o other _____)

_____ (o cell phone, o hotel number, o e-mail, o other _____)

If the doctor is unable to contact you, please leave an alternate contact

_____ (phone #) _____ (name) _____ (relation)

In the event that emergency medical care is required, I authorize treatments up to \$_____.

Feeding Instructions:

Own food? YES or NO	Last meal fed: _____
Amount of food per feeding _____ cups _____ cans	
How many feedings per day _____	If once per day; AM or PM? _____
Special feeding instructions _____	

Treatments/Procedures:

<input type="checkbox"/> Bath (date to be done: _____)	<input type="checkbox"/> Anal Glands Expressed
<input type="checkbox"/> Nail Trim	<input type="checkbox"/> Medications to be given (list below)
<input type="checkbox"/> Ear Cleaning	<input type="checkbox"/> Vaccines (will include a physical exam)
<input type="checkbox"/> Other _____	

*****All of these procedures will be charged in addition to the daily boarding rate*****

Medications to be given:

Medicine	Directions	Last dose given
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

*****A charge for giving medications will be in addition to the daily boarding rate*****

Please complete the reverse side of form also

Vaccination Requirements – Each patient must be current on all vaccinations and screening tests.

See below for the vaccinations and/or screening tests that need to be updated for your pet to stay with us. Our doctors will perform a physical exam and update the required vaccines and/or screening tests at the owner's expense. If you have any further concerns, please let us know so we can address these.

Dogs	Cats	Concerns for the doctor **
o Rabies **	o Rabies **	_____
o Distemper **	o Distemper **	_____
o Bordatella **	o Leukemia ** (not required)	_____
o Lepto ** (not required)	o FeLV/FIV Test	_____
o Borrelia ** (not required)	o Fecal Analysis	_____
o Influenza ** (not required)		
o Heartworm Test		
o Fecal Analysis		
**These procedures will be charged in addition to an exam fee of \$71.00		

Boarding Policy

- Boarding charges are determined by the number of nights a pet stays here with us and are per pet.
- Upon your pet's arrival, he/she will receive a complimentary health screening performed by one of our Licensed Veterinary Technicians. These results will be available upon request. We will be happy to review them with you.
- I understand that any problem that develops with my pet during his/her stay will be treated as deemed best by the staff veterinarians until I can be contacted and I assume full responsibility for the treatment expenses involved. Centreville Animal Hospital and its staff will not be held liable for problems that develop provided reasonable care and precautions are followed.
- We do provide bedding, and strongly recommend that personal belongings be left at home. We are not responsible for items lost, broken, or damaged.
- Any pet requiring a bath, due to soiling, prior to pick up will be bathed at the owner's expense.
- Boarding can be stressful for some pets. Stress-related colitis can result from a change in environment, water, food, as well as from the noise of other pets. Should this occur, Centreville Animal Hospital will conduct a stool sample analysis and prescribe a medication and/or special diet while boarding.

My Pet is scheduled to board in the cage listed below and I understand that the charge is per night, per pet. Intensive care boarders will stay in our treatment room for close observation.			
o Cat	\$28.50	o Intensive Care Cat or Top Cage	\$51.00
o Top Cage	\$32.00	o Intensive Care Bottom Cage	\$59.00
o Bottom Cage	\$34.00	o Medications (1-3)	\$7.00/day
o Indoor Run	\$41.00	o Medications (4 or more)	\$11.00/day

Signature of Owner or Responsible Party

Printed Name

Date

Double Boarding Release

I elect to keep my pets in the same cage; I understand that housing multiple animals together can result in serious, even life-threatening, confrontations between pets. After due consideration of the risks involved, I hereby instruct Centreville Animal Hospital to house _____ together. I assume all responsibility and liability for any injuries resulting from the joint boarding. I also agree to be responsible for any medical, diagnostic, and/or surgical fees for the care of injuries resulting from interactions between the pets. Even though the pets may board together, I acknowledge that there is no discount given.

Signature of Owner or Responsible Party

Printed Name

Date

Centreville Animal Hospital

13663 Lee Highway Centreville, VA. 20121 703-830-1182 703-830-1217 (fax)

Commonwealth of Virginia Veterinary Disclosure Form

{Please read carefully before signing}

Centreville Animal Hospital has business and medical staffing hours as follows:

Mondays	7:00 AM TO 6:30 PM
Tuesdays	7:00 AM TO 6:30 PM
Wednesdays	7:00 AM TO 6:30 PM
Thursdays	7:00 AM TO 6:30 PM
Fridays	7:00 AM TO 6:30 PM
Saturdays	8:00 AM TO 2:00 PM

Therefore, this is to inform you that we have no in-house, on-duty continuous medical staff care:

1. Overnight, from closing time each weekday until opening the next day.
2. Weekends, from closing time on Saturday to opening time Monday morning at 7:00 am
3. Holidays that this also applies include:

New Year's Day	Labor Day Monday
Memorial Day Monday	Thanksgiving
July 4th	Christmas Day

I have read this form and I am aware of the above staffing hours.

Signature of Owner or Responsible Party

Printed Name

Date