

**Hillside Veterinary Associates, LLC
Boarding Check-In**

X LARGE RUN \$100.00 ☐	RUN \$27.00 ☐	EX-LG CAGE \$27.00 ☐	LARGE CAGE \$25.00 ☐
MED CAGE \$24.00 ☐	SMALL CAGE \$23.00 ☐	CAT CAGE \$19.50 ☐	CO-BOARDING ☐
DAY BOARD K-9 ☐	DAY BOARD FELINE ☐		

IS PET TAKING MEDICATIONS? YES ☐ NO ☐ IF SO, PLEASE LIST AND INDICATE WHEN LAST GIVEN: _____

PET TO RECEIVE: EXAM ☐ DENTAL ☐ SPAY ☐ NEUTER ☐ OTHER ☐ _____

BATH ☐ PEDICURE ☐ GROOM ☐ DA2PPLCV ☐ RABIES ☐ BORDETELLA ☐ FELINE VACCINES ☐

PET EATS: OWNER FOOD ☐ WET FOOD ☐ DRY FOOD ☐ WET&DRY ☐ SPECIAL DIET: _____

FEEDING INSTRUCTIONS: AMOUNT _____ HOW MANY TIMES PER DAY? _____ OR FREE FEED _____

DOES YOUR PET HAVE ANY SPECIAL NEEDS WE SHOULD KNOW OF? _____

In Case of an Emergency

OWNERS PHONE NUMBER (1) _____ (2) _____

IF YOU ARE UNAVAILABLE--NAME AND PHONE NUMBER _____

DO YOU AUTHORIZE THIS PERSON TO MAKE EMERGENCY DECISIONS IF WE CANNOT REACH YOU? YES ☐ NO ☐

IN THE EVENT YOU AND YOUR REPRESENTATIVE ARE UNAVAILABLE IN AN EMERGENCY **PLEASE CHOOSE ONE OF THE FOLLOWING:**

☐ DO WHATEVER IS NECESSARY FOR THE HEALTH AND WELLBEING OF MY PET; I ACCEPT RESPONSIBILITY FOR CHARGES.

☐ RENDER ONLY WHAT YOU DEEM CRITICALLY NECESSARY FOR THE LIFE OF MY PET; I ACCEPT RESPONSIBILITY FOR CHARGES.

PICK-UP HOURS: MONDAY - FRIDAY 7:15 AM - 5:30 PM SATURDAY 8:15 AM - 11:30 AM

PETS NOT PICKED UP BY 12:00 NOON ON SATURDAY WILL INCUR AN ADDITIONAL 2 NIGHT'S BOARDING CHARGE. PETS RECEIVING BATHS ON THE DAY OF PICK UP WILL BE READY AFTER 2:00 PM.

I UNDERSTAND THAT MY PET WILL BE TREATED AT MY EXPENSE FOR FLEAS, TICKS OR INTESTINAL PARASITES IF FOUND WHILE BOARDING.

WE ARE UNABLE TO ACCEPT ANY PERSONAL ITEMS FOR PETS UNLESS THE OWNER IS WILLING TO RELINQUISH THE ITEM. WE ARE NOT RESPONSIBLE FOR ANY LOST PERSONAL ITEMS (I.E. BLANKETS, TOYS, LEASHES, COLLARS, BOWLS, ETC.). WE WILL DO EVERYTHING TO MAKE YOUR PET COMFORTABLE.

I UNDERSTAND THE NATURE OF THE BOARDING SERVICES PROVIDED BY HILLSIDE VETERINARY ASSOCIATES, LLC AND THE COSTS I WILL INCUR FOR THE SERVICES I HAVE REQUESTED. I FURTHER CONFIRM ALL OF THE INFORMATION CONTAINED ABOVE AND GRANT AUTHORIZATIONS AS INDICATED ABOVE.

SIGNATURE

DATE

OWNER'S NAME: _____

FIRST

LAST

PET NAME

CHECK IN DATE: _____ CHECK OUT DATE: _____ CHECK OUT TIME: _____