

Boarding Form

Pet's Name: _____ PID: _____

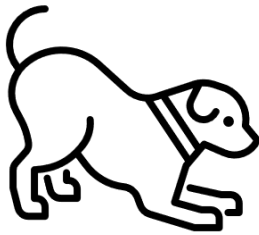
Client's Name: _____ CID: _____

Best Contact Number: _____

Arrival Date: _____ Departure Date: _____

Veterinarian Visit: YES OR NO REASON: _____

Flea Prevention: _____ Last Applied: _____



EXTRAS

Extra Play Time	\$8	
Nature Walk	\$9	
Medication Administration	\$3.50	
Grooming/Bath	Varies	



Additional Comments/Requests: _____

*****WE REQUIRE ALL 5 VACCINES TO BE CURRENT (RABIES, DHPP, BORDETELLA, INFLUENZA AND LEPTOSPIROSIS) AND A FECAL SCREENING*****

***POLICY:** For the safety of your pet and the other pets on the premises, we require all animals to be up to date on vaccinations, fecal and flea prevention. If our records show that your pet is due for any of the above requirements, in signing below you agree to either A) have JCVC proceed with updating all requirements or B) you will provide us proof within 2 hours of dropping off at JCVC.*

Also, I agree that the information stated above is accurate. The dates for arrival and departure are correct. I am aware of the hours of operation for JCVC, no pets will be discharged after 2:00 PM Saturdays and Sundays. JCVC is not responsible for any property that is left with boarding pets. I understand that if a clean-up bath is needed before departure, it will be at my own expense. I understand there are additional charges for extras and medication administration.

Owner or Authorized Representative Signature

Date

