

# Sunset Blvd Animal Clinic Boarding Agreement

Patient Name \_\_\_\_\_ Arrive \_\_\_/\_\_\_/\_\_\_ Time: \_\_\_\_\_ Depart \_\_\_/\_\_\_/\_\_\_ Time: \_\_\_\_\_

Contacts: 1.) \_\_\_\_\_ Phone # \_\_\_\_\_

2.) \_\_\_\_\_ Phone # \_\_\_\_\_

Diet: \_\_\_\_\_ Supplied by:  clinic  owner Amount: \_\_\_\_\_ Feed in:  AM  PM

Yes  No Playtime (\$6.80 per session) S M T W Th F S Date to begin: \_\_\_\_\_ End: \_\_\_\_\_

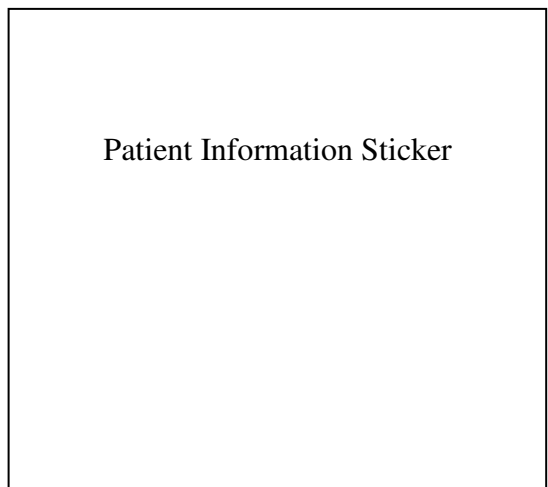
Yes  No Belongings (check list on feeding sheet)

Yes  No Medication (\$6.10 /day)

Meds \_\_\_\_\_ Inst \_\_\_\_\_ Begin AM / PM

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All pets admitted must meet SBAC current vaccination standards

Is your pet being treated with monthly flea/tick prevention?

**Yes:** which product? \_\_\_\_\_  **No**

\*if any fleas, ticks, or parasites are found on your pet, at any time while in the clinic, they will be treated for the condition at the owner's cost. Capstar is administered to all pets.

Are any veterinary services to be performed during boarding?

**Yes** (See exam form for details)  **No**

**We will attempt to contact you prior to any treatment, if we are not successful do we have permission to treat:**

• any minor issues (i.e. ear/skin/eye infection, diarrhea)?  Yes: amount authorized \$ \_\_\_\_\_  No

• any emergency procedures?  Yes: amount authorized \$ \_\_\_\_\_  No

Pet is to be bathed before release at owner's cost?

Yes  No (If declined and bath is needed, a doctor will assess and determine if pet requires bath upon release at owner's cost)

Charges for services, medications and supplies are due upon receipt of the invoice. Payment can be made by cash, check, or credit card. In the unlikely event that a balance is not paid and prior satisfactory payment arrangements have not been approved billing fees will be charged. Invoice account balances remaining unpaid 30 days after the date of the invoice will be assessed a fee of \$8.50 per month. If you neglect to pick up your pet within 5 days of the above date, we will assume that the pet is abandoned and we are hereby authorized to make arrangements for the pet as we deem necessary.

I have read and understand all information cited above

Signature: \_\_\_\_\_ Checked in by: \_\_\_\_\_