

## BOARDING AGREEMENT

Owner's/Agent's Name: \_\_\_\_\_

Boarding Dates: \_\_\_\_\_

Contact Name and Phone # we can call with any questions: \_\_\_\_\_

Pet(s) Name(s): \_\_\_\_\_

**A. Vaccines:**

\* All boarded pets MUST be current on their Rabies Vaccination. In addition, dogs must have a current DA2PP and Bordatella (Kennel Cough) vaccine. Cats must be current on FVRCP. If your pet(s) did not receive their vaccines at this facility, you must show documentation. If any vaccinations are past due, your pet(s) must be vaccinated PRIOR to accessing boarding facility for their protection and for the protection of other borders. VACCINES ADMINISTERED AT THIS FACILITY WILL BE ADDED TO YOUR BILL.

**B. Diet:**

\* We offer Royal Canin Gastrointestinal diet at no additional charge. However, you are welcome to bring your pet's regular food to be used during boarding. ALL FOOD MUST BE LABELED WITH YOUR PET'S NAME AND FEEDING INSTRUCTIONS.

**C. Medication:**

\* We will administer any required medications to your pet per your instructions. IF MEDICATIONS NEEDS TO BE FILLED OR REFILLED, THEY WILL BE ADDED TO YOUR BILL.

**D. Social Media:**

\* We would love to make your pet Facebook famous! I granted HTAH and it's employees the right to take photographs of my pet to use for purposes of social media promotion. I understand my personal information will never be released.

INITIALS \_\_\_\_\_

**E. Statement of Boarding Policy:**

**\* BOARDING POLICY:**

1. Please notify us as soon as possible if the length of your pet's stay needs to be adjusted. If your pet must stay past initial scheduled date of departure and the space has been reserved by another client, your pet may be moved to a different space consistent with pet size for the remainder of their stay with no reduction in boarding fees.
2. Pets must be picked up between 8:00am and 5:45pm Monday-Friday or 8:00am-11:45am on Saturdays.
3. Personal items may be left only at your own risk. We are not responsible for loss or damages. All personal items must be labeled with your pets name.
4. Hill Top Animal Hospital is securely locked overnight and on weekends and a monitored security system is in place. There are no overnight attendants. Dogs are walked outside a minimum of 4 times daily and returned to clean beddings. Cats will have litter boxes scooped on an as needed basis.
5. Should my pet(s) identified on this record become ill, I hereby request that HTAH provide all reasonable medical treatment deemed necessary, not to exceed \$\_\_\_\_\_. In the event of my pet's illness, the staff at HTAH may not be able to contact me immediately and is therefore authorized to initiate appropriate treatment until I can be reached. I agree to pay all related expenses associated until further care and costs can be discussed with attending veterinarian.

I HAVE READ THE ABOVE AND AM IN FULL AGREEMENT.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_