

Pleasantville Animal Hospital of Fallston
Boarding Consent Form

Pick-up and drop-off times are **Saturdays at 7:30a-12p and promptly at 7pm**, and **Sundays at promptly 8:30a and 7pm**. If during the week, please come in during normal office hours.

Drop Off Date & Time: _____ **Pick-Up Date & Time:** _____

All pets must be up to date on their Rabies, Distemper Combo, and Bordetella vaccinations to ensure the safety of all pets boarding with us. We can booster these vaccines while your pet is here if they are due. Please let us know if there are any other procedures you would like done while your pet is here.

We will take every opportunity to ensure the well being of your pet during their stay. One of the advantages of boarding your pet at our hospital is that veterinary attention is readily available should the need arise. If your pet becomes ill, we will call the emergency number(s) listed regarding your pet's symptoms, treatment options, and estimate of additional costs. If no one can be reached however, it is our responsibility to perform whatever services the doctor deems necessary for you pet's well-being until someone can be reached.

I understand that as a veterinary facility, and that my pet could potentially come into contact with infectious bacterial or viral agents. Current vaccinations protect against the vast majority of these illnesses, however, I will not hold Pleasantville Animal Hospital of Fallston liable for any illnesses that may arise from my pet's stay.

We have veterinary approved food available here, but recommend that you bring your own food so your pet can continue without a diet change. The hospital will do its best to take care of personal items brought in, but is not responsible for the loss of any personal belongings that are left with your pet.

Pets are normally excited and happy to see their owners upon discharge. Always allow your pet to "settle down" for at least one hour after arriving home before offering food or water; otherwise an upset stomach may occur.

I understand that all reasonable precautions will be taken to assure the safety and well being of the animal(s) while in the hospital. I hereby authorize the clinical staff of Pleasantville Animal Hospital of Fallston to perform whatever procedures necessary should an emergency situation arise.

Animal's Name: _____

Client Name: _____

Contact Number: _____

Signature: _____ Date: _____