

Boarding Information Sheet

**** Please Complete & Return at Time of Admission ****

Pet's Name: _____ Dog / Cat Breed: _____

Owner's Name: _____

Phone Numbers: (____)____-____ (____)____-____ (____)____-____

Emergency Contact Name: _____ Phone: (____)____-____

Others authorized to pick up in your absence: _____

ONLINE MONITORING OF YOUR COMPANION IS AVAILABLE. A camera in your companion's kennel can be accessed at any time, day or night, by you. There is an additional fee for this service and only certain kennels have this capability. Please let us know when you book your stay if you desire this service. Yes / No

If you have more than one pet boarding would you like to board them together _____ or separately _____
(Dogs with dogs and cats with cats only) **Dogs 55 lbs or more, cannot be kenneled together**

General Pet Health Questions: No Change in Health From Last Stay: Initials: _____

1. Has your pet been diagnosed with any medical conditions, or disorders? Yes / No

If yes, please list: _____

2. Does your pet have any allergies or sensitivities to anything? Yes / No

If yes, please list: _____

3. To the best of your knowledge, does your pet have any food, treat, or toy aggression with people or other animals? Yes / No

If yes, please describe: _____

4. Does your pet have any special needs? Yes / No

If yes, please describe: _____

5. Is your pet prone to any recurrent problems? Yes / No

If yes, please list: _____

Dietary Requirements: No Change in Diet From Last Stay: Initials: _____

**Changing an animal's diet suddenly can lead to stomach upset and other GI issues, which is why we ask that you bring your pet's own food so that we can help reduce those risks. Please make sure that you bring enough food for the duration of your pet's stay with us plus a few extra days worth (to be safe). Also, please only bring food and treats that your pet is already familiar with rather than introducing any new or "special" foods.

Name of Diet: _____ Dry / Canned / Both (Circle)

Quantity: _____ Frequency: _____

Special Feeding Instructions: _____

Please initial one of the following:

_____ **I have previously completed a Boarding Authorization Form (BAF) and it is on file at WVH. Nothing pertinent information**

has changed since that time.

_____ **I am completing a BAF today.**

WVH has a spacious grassy yard for our canine guests to enjoy that is enclosed with a 6 foot high wooden privacy fence. Please understand that "off leash" access to our yard will still be under the supervision of one of our staff members, and is permitted at our discretion for the safety and wellbeing of our guests.

Please **initial** your preference below:

_____ I would like my dog walked on a leash at all times.

_____ I would like my dog to have attended "off leash" access to the yard. I understand that by choosing this option there are inherent risks (however small). I also ensure, to the best of my knowledge, my pet does not dig under, climb, or jump over fences.

Medications: No Change in Medication From Last Stay: Initials: _____

Name of Medication: _____ Dose: _____

How often do you give the medication? _____ Time of Day _____

Was it administered on day of admitting? _____ If yes, what time was it given? _____

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Belongings Brought with Pet: Please label ALL items.

If you would like to bring your own blankets and beds for your companion, WVH cannot be held responsible if they are damaged or destroyed. You may bring along 2 toys for your pet to enjoy while they are staying with us. Please choose carefully – as WVH is not responsible for any items destroyed or lost while in our care.

Items brought (please provide descriptions): Treats: _____

Leash: _____ Collar: _____

Toys: (description) _____

Carrier : _____

Other (please describe in detail): _____

Permission to supply a blanket: Yes No (If no, please explain _____)

Unless space is available in the large dog runs, any dog under 25 lbs, will be charged the large dog price for boarding in a run instead of a kennel.

Additional Services: (Please circle all that you would like performed)

Pedicure (NC) **Bath (add'l charge)**

We appreciate that you have entrusted us with the care of your companion during your absence. To ensure the safest environment for all guests and patients staying at our facility we have set the following guidelines:

1. We are only able to accept Canine and Feline guests for boarding.
2. Dogs must be current (for their age) on vaccinations for Rabies, Distemper, Parainfluenza, Parvovirus & Bordetella (Bordetella given at least 1 week prior to boarding)
3. Cats must be current on vaccinations for Rabies, Rhinotracheitis, Calici, Chlamydia Psittaci, Leukemia & Panleukopenia.
4. All guests must have had a negative fecal test done within 6 months (for dogs) or 12 months (for cats) of being boarded.
5. Upon admission, all guests must be free of ticks, fleas, and flea dirt or we will treat accordingly at the owner's expense.

Signature _____

Date _____