



Boarding Form

All Boarding Canines must have a current physical exam and be current on the following: DHPP, Leptospirosis, Rabies, Bordetella, Canine Influenza, Heartworm and Flea prevention.

If _____ is due for any of the above required treatments, PetCare of Newberry will administer those treatments during boarding.

(Initial) I have read and agree that my pet is in compliance with the requirements for boarding at PetCare of Newberry. If my pet is not in compliance, I agree that my pet will be brought up to current compliance at my expense.

(Initial) **PetCare of Newberry** reserves the right to refuse aggressive dogs, and intact males or females in heat, at the Doctor's discretion.

(Initial) If your pet becomes ill during boarding, we will make every effort to contact you and/or your emergency contact. In the event that you cannot immediately be reached, **I give (Initial) or do not give (Initial)** consent for treatment or diagnostics to be initiated. Owner agrees to be financially responsible for any charges incurred up to \$ _____.

PetCare of Newberry cannot be held liable for any pet who digs, jumps or climbs fences while boarding. To better help us prepare for your pet's safety, please indicate whether he/she is prone to:

Digging: YES / NO Jumping: YES / NO Climbing: YES / NO

Pet:

Boarding Drop-Off Date:

Emergency Contact:

Feeding Instructions: (Circle One)

Owner Food

Kennel Food

Times Daily: _____

Amount: _____

Current Medications:

Rx Name	Dose	Frequency	Last Dose Given

PetCare of Newberry cannot guarantee the return of individual items. We provide bedding and bowls for each patient.

Belongings: (Circle all that apply): **Leash** **Collar** **Bed** **Blanket(s)** **Medication** **Food**

Treats **Toy(s)** **Training Pads** **Bowl(s)** **Towel(s)** **Other:** _____

Please list any medical conditions or food/medical allergies: _____

Comments/Notes/Procedures to be performed: _____

NOTE: If completing digitally, please type your legal name in the Owner's Signature block below. By typing your legal name and email this document to us, you agree that this is a binding document for service.

Owner's Signature: _____

Date: _____

For Tech Use Only:

Check-In: _____ UTD: _____ PC: _____

Items: _____ WB: _____ BWP: _____

Elimination Chart for <

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