

Lake City Animal Clinic, Inc. Boarding Information

Welcome to "Lake City Bed & Breakfast!" We are so pleased that you have decided to leave your pet in our care. We know you have entrusted us with a family member, and we will strive to give only the best personal attention to your special friend. Please be sure to fill out the following information sheet so that we may provide the most complete care possible.

Thank You,
The Staff of Lake City Animal Clinic, Inc.

Owner Name: _____ Pet's Name: _____

Boarding Dates: _____

*NOTE: Please pick up your pet before 2PM;
otherwise, a Day Care Charge will apply.*

MEDICATION

* Is your pet on any medication? YES NO
A \$2.00 per administration charge will apply.

MEDICATION _____ DOSAGE _____ LAST GIVEN _____

MEDICATION _____ DOSAGE _____ LAST GIVEN _____

MEDICATION _____ DOSAGE _____ LAST GIVEN _____

DIET

* Did you bring your pet's food? YES NO

* How many times is your pet fed per day? _____

* How much food do you feed per meal? _____
(we feed maintenance food twice daily if diet is not provided)

PERSONAL ITEMS ARE DISCOURAGED

Any personal items left with your pet must be identified with a PERMANENT MARKER. Our Animal Care Technicians will mark the item(s) if it is not already identified.

* *Please note any personal belongings you are leaving with your pet:* _____

*While we work hard to assure care of personal items, Lake City Animal Clinic, Inc.
cannot be responsible for lost or destroyed items.*

(OVER PLEASE)

VETERINARY CARE

* Your pet is due for the following vaccines:

- Vaccinations

Feline: Rabies* _____ FVRCP* _____ Leukemia _____
Canine: Rabies* _____ DHLPPC* _____ Bordetella* _____
Heartworm Test _____ Fecal _____

* For the safety of your pet and the others in our facility, we require these vaccines and tests for boarding. (additional charges will apply)

Examination for any current problem: _____

PAMPER EXTRAS

- Pamper sessions/extra walks/ and one on one play time are available (at \$5 per session)

Please indicate number per day: _____

- Would you like your pet bathed before going home? YES NO
(A charge will apply, includes courtesy nail trim)

- Would you like your pet to have a nail trim? YES NO
(a charge will apply)

FLEA CONTROL

- We work hard to control possible flea infestations on our clinic. However, in any setting with multiple pets and outdoor yard exposure, fleas can be a problem during certain times of the year. If your pet has fleas upon entering the hospital, he/she will be treated. A charge will apply.

AUTHORIZATION RELEASE

- Authorization for Medical Care and Financial Responsibility: In the event of accident or illness, I authorize treatment for my pet(s) deemed necessary by the veterinary staff of Lake City Animal Clinic, Inc. I also agree to assume full financial responsibility for charges incurred during boarding.

Signature: _____ Date : _____

Emergency Contact: _____