

{NAME} {{PATIENTID}} {FULLNAME} {{ID}} {PHONENUMBER}
{SPECIES} {BREED} {AGE} {SEX} {CURRENTWEIGHTUNITDATE[SHORT]}



Boarding Agreement

THE PET STOP will not board your pet without updated vaccination documentation. Canines must be up to date on Rabies, Distemper/Parvo, Leptospirosis, and Bordetella **AS WELL AS AN UPDATED, NEGATIVE FECAL RESULT**. Felines must be current on Rabies and FVRCP. In order to give these vaccines, an exam must be performed.

If your pet is not up to date on any of these vaccines, they will be given to your pet. A fecal will be performed on your pet if it is not current. IF YOUR PET IS POSITIVE FOR INTESTINAL PARASITES WHILE IN OUR FACILITY, A DEWORMER WILL BE GIVEN AND THE OWNER IS FINANCIALLY RESPONSIBLE. These services must be paid for at the time you pick up your pet as well as any and all boarding and/or bathing charges. **The Pet Stop does not board intact males. There are no exceptions to this.**

Emergency Contact (other than owner)

Name : _____

Phone : _____

Other Information:

Has your pet been ill in the last 30 days? Yes No

Is your pet displaying any unusual symptoms such as coughing, sneezing, or upset stomach?
 Yes No.

Has your pet ever bitten, attacked or shown aggressive behavior towards people or dogs?

Yes No. If yes, explain:

Has your pet ever been bitten or attacked by another dog, or been abused? Yes No. If yes, explain:

Please describe any behavioral problems, identify any dietary conditions, or other important

{NAME} {{PATIENTID}} {FULLNAME} {{ID}} {PHONENUMBER}
{SPECIES} {BREED} {AGE} {SEX} {CURRENTWEIGHTUNITDATE[SHORT]}

information we should know. Please describe any medical or physical conditions, including any medications or allergies.

***** Please Read and Initial Each Section *****

1. ____ The Pet Stop reserves the right to immediately change your pet's type of boarding or daycare if we believe it is necessary to protect the health and well-being of your pet, other pets, or our staff (e.g immediate medical isolation), and Owner agrees to pay any additional costs associated with the change.

2. ____ Owner agrees to pay all costs and charges for special services requested, and provide updated vaccination records from your vet before starting daycare or boarding.

3. ____ Owner agrees that the pet shall not leave the kennel until all charges are paid in full to The Pet Stop.

4. ____ Owner agrees to be solely responsible for any and all acts or behavior of Owner's pet while it is in the care of The Pet Stop.

5. ____ **Owner specifically represents that they are the lawful and valid owner of the pet.**

6. ____ **Owner specifically represents that the pet has not been exposed to any infectious diseases within 30 days prior to boarding to the best of their knowledge.**

7. ____ A pet that is unclaimed for seven days beyond its scheduled discharge date is considered abandoned and will become the property of The Pet Stop. Every effort will be made to contact the Owner if abandonment becomes an issue. If for any reason the pet is not going to be picked up on the scheduled dismissal date, Owner shall contact The Pet Stop to make arrangements to extend the animal's stay and will pay the additional charges based upon the daily rate.

8. ____ If the pet becomes ill or if the state of the animal's health requires attention, The Pet Stop is authorized to engage the services of a veterinarian of Tabbs Creek Animal Hospital for treatment of the animal. Due to our association with Tabbs Creek Animal Hospital, we cannot allow untreated animals on premises that pose a health risk to our staff and other patients/boarders. Our first step will be to contact the Owner for permission to treat any illness of the Pet. If we cannot reach you, the veterinarian is authorized to treat your animal. Owner agrees to be responsible for all veterinary costs provided. If a veterinarian determines that emergency treatment is needed to save the animal's life or preserve quality of life, and we cannot reach you or the Emergency Contact, we will authorize the veterinarian to perform the emergency treatment. Owner agrees to be responsible for all veterinary costs provided to their animal. Due to the threat of infectious disease being spread, refusal of treatment is NOT

{NAME} {{PATIENTID}} **{FULLNAME}** {{ID}} {PHONENUMBER}
{SPECIES} {BREED} {AGE} {SEX} {CURRENTWEIGHTUNITDATE[SHORT]}

permissible.

9. ____ Neither Owner nor The Pet Stop shall be responsible for failure or delay in performing its duties under this Agreement if such failure or delay is due to tornados, hurricanes, snowstorms, fire, or other acts of nature.

OWNER ACKNOWLEDGES AND AGREES TO THE ABOVE:

Owner Signature and Date

Phone number

Emergency phone number

****THIS AGREEMENT IS VALID FOR 60 DAYS****