

BOARDING CONSENT FORM

THANK YOU FOR CHOOSING TO BOARD YOUR PET AT SEVILLE VETERINARY HOSPITAL! FOR YOUR PETS SAFETY, WE REQUIRE THAT ALL BOARDING PATIENTS BE CURRENT FOR THEIR ANNUAL EXAM, VACCINES, AND FLEA&TICK PREVENTION.

- CANINES: RABIES, DHPP, BORDETELLA, LEPTOSPIROSIS AND INFLUENZA.
- FELINES: RABIES, FVRCP, FELV/FIV AND BORDETELLA.

CLIENT INFORMATION			
Date: Owner	First and Last Na	ame:	
Emergency Contact:		Ph	one:
Ple	ase make sure the	re is a responsible contact to make	decisions for your pet(s).
BOARDING RESERVATION			
		Pick-Up Date:	
Total Number of Days:	(I	If picked-up before 11 am, there	e will be no charge for that day)
PATIENT INFORMATION			
Patient:	Sex:	: M / F / NM / SF Species: FEL c	or K9 Age: Breed:
Allergies: Yes □ No □ Plea	ase List:		
DIET			
Food from home ☐ Hospita	al Brand of	food:	Dry □ Canned □
		ften:	•
MEDICATIONS			
	How Give	n:	
Name.			
D	•	D/ day fee for medication admin	istration)
Does your pet have accident	ts in his/her kenn	iei: YES / NO	
BEHAVIOR			
			e Explain:
			ease Explain:
Is your pet leash trained: Ye	es 🗆 No 🗆 Pleas	e Explain:	
BELONGINGS			
SEVILLE VETERINARY HOCKS	TAL DISCLOSURE	INCORNATION Plane word or	wyofully before circuits
		INFORMATION Please read co	
			5:00 pm, Tuesday and Thursday 7:00 am – 7:00
			you that we do are not staffed 24 hours for
•		<u> </u>	day according to the above schedule. We
•	-	lar but intermittent basis only. N	No pick-ups are available on Sundays, after
hours, or holidays. Please in			
Flea and Tick Policy: All boa	arding pets must	be free of fleas and ticks. All per	ts will be admitted to boarding after they have
received an application of fl	ea and tick preve	ntion. Please initial	
Vaccination Policy: To insur	e the protection	of all pets under our care, the fo	ollowing vaccinations must be up to date. Dogs
		= :	s: FVRCP (Distemper), Bordetella (Kennel
		_	ny permission for Seville Veterinary Hospital to
			an examination fee will be charge as well as the
vaccination fee to my final b			
	_	_	t's name and your last name. Please verify that
· ·		The state of the s	e for any damaged or lost items. We provide
bedding, toys, and bowls for			
			inary Hospital is that veterinary attention is
readily available should the	need arise. If you	ır pet becomes ill, we will call th	e emergency number(s) listed regarding your
pet's symptoms, treatment	options, and a ve	erbal estimate of additional cost	s will be provided. If no one can be reached,
Seville Veterinary Hospital v	vill perform what	ever services the doctor deems	necessary for the best care for your pet until

someone can be reached. This includes only non-elective treatments and any necessary diagnostics. Please initial ______

gnature:	Date:	