



Countryside Veterinary Clinic Boarding Agreement

We are pleased that you entrust us with your pet(s) while you are away!
The following information will help ensure everything is in order for your pet's stay.

Client Name: _____ Date: _____

Pet Name: _____ Pet Name: _____
Pet Name: _____ Pet Name: _____

Pick-up Date: _____ Approximate Pick-up Time: _____
Drop-off and Pick-up Times: Monday-Friday 8am-7pm. Saturday 8am-1pm. Closed Sundays and Holidays

Contact Number where you can be reached while you are away: _____

Mandatory Local Emergency Contact Number: _____

Home Phone: _____ Cell Phone: _____ Email: _____

DIET
Your pet will be fed Science Diet Sensitive Stomach dry food. If you would like your pet to eat a different diet, please provide your own food for the length of your pet's boarding stay. For the safety of our staff and other boarding animals, Sensitive Stomach diet will be substituted for any raw food items.

Food: _____ Directions: _____
Food: _____ Directions: _____

MEDICATIONS
Prescriptions for your pet(s) should be **clearly labeled** in the original container. Please leave detailed instructions for each individual medication below and what time the medication was last given. **There is a \$3 per day charge for medications/supplements or additional/special care to be administered.**

Medication: _____ Directions: _____ Last given: _____
Medication: _____ Directions: _____ Last given: _____

CLEANSING BATHS (Please call our office to ensure your pet is ready to go home from their bath the day of pick up.)
We offer a complimentary bath to **dogs** boarding 7 nights or longer with the exception of medicated baths and/or fractious, overly distressed, heavily coated, or badly matted dogs. *A complimentary bath does not include a nail trim.*
If your dog is boarding less than 7 nights and you would like a bath to be given, there is an additional charge.
We are not able to offer complimentary baths for cats, but can give a cleansing bath at a charge if you request.

Bath: YES / NO Date Pet(s) is to be bathed: _____ **Nail Trim: (\$23 or free with paid bath): YES / NO**
Please request baths to be done the day before if you are planning to pick up your dog BEFORE 11am.

ANIMAL BEHAVIOR
To the best of your knowledge, is your pet aggressive with/under any of these circumstances? **Circle all that apply:**
Food/Treats Toys Territory/Cage Dogs **Humans :** Male Female All Other: _____

DAY BOARDING / DAY CAMP (only fill out for one day pet stays)
If your pet is staying with us for day only boarding / day camp for multiple days in a row in the same month, please write the date of each day your pet is staying for the day with us if **NO CHANGES** will occur to this boarding agreement for each day. We must have an up to date boarding form monthly.
Date: ___/___/___ Date: ___/___/___ Date: ___/___/___ Date: ___/___/___ Date: ___/___/___

ADDITIONAL SERVICES (We are happy to help you with other needs. Ask receptionists for costs.)

ANOREXIA

If your dog or cat is not eating well during their stay, we will entice them to eat by hand feeding, offering other dry or canned foods. We may deem it necessary to administer a safe appetite stimulant. If an appetite stimulant and/or special diet to entice eating is needed, a charge will be added to your bill.

STRESS DIARRHEA

Sometimes your pet may experience stress diarrhea while boarding. In that instance your pet will be examined by a veterinarian and a stool sample may be tested. We may deem it necessary to administer a safe probiotic or Metronidazole and/or prescription diet i/d. If any of these are needed, a charge will be added to your bill.

PARASITES

If any parasites are found on or within the feces of your pet while boarding with us, your pet will be treated before entering our boarding facility. These charges will be added to your bill.

PERSONAL ITEMS

Clean bedding will be provided for all pets boarding with us. Your pet’s boarding area is cleaned thoroughly daily (or more often as needed). We prefer to use and wash our own bedding but if your pet requires you to provide special bedding, please label with a permanent marker. Although we make an effort to return all items left with us, **COUNTRYSIDE VETERINARY CLINIC IS NOT RESPONSIBLE FOR DAMAGED OR LOST PERSONAL ITEMS LEFT WITH PETS.**

PROOF OF VACCINES

Required vaccines for Dogs: Rabies, DA2LPP, Bordetella, and the dual-strain (H3N8-H3N2) Canine Influenza vaccine.
Required vaccines for Cats: Rabies and FVRCP.

If not up to date, or unable to provide proof of vaccination, your pets will be given any missing required vaccines. A physical exam will also be given if receiving DA2LPP, FVRCP or Rabies, or if receiving any vaccine and your pet has not has a physical exam with us within the last year. These charges will be added to your bill.

ILLNESS/INJURY

Countryside Veterinary Clinic takes all possible precautions to avoid illness and injury to your pet while here. If your pet becomes ill, or in the event of an accident or injury, we will call the emergency numbers listed above. If no one can be reached, we will perform any treatment deemed necessary by a veterinarian. Medical costs may become your financial responsibility.

24- HOUR SUPERVISION Countryside Veterinary Clinic **does not provide 24- hour supervision.** During weekends and holidays, scheduled visits are made to the hospital by our hospital staff.

ANIMAL ABANDONMENT

According to Maryland State Law, if an animal is abandoned under our care, it becomes the property of our hospital.

Any additional phone numbers or information, please write here: _____

**By signing below, I have read and agree to all the terms of this boarding agreement by
Countryside Veterinary Clinic.**

Client Signature: _____

Client Printed Name: _____