

Ahwatukee Commons Veterinary Hospital Boarding Care & Authorization

Client N	lame:		Pets Name:				
Client Phone Number:			Breed:				
Drop of	ff Date & Time:		Age:				
Pick up	Date &Time:		Sex: Male Female Neutere	ed Male Spayed Female			
Diet a	and Feeding:						
	Please feed my pet	clinic food (Royal Canin S	Satiety-High Fiber)				
	Please feed my pet'	s own food (type)					
	I have provided my	pet's own treats (type ar	nd instructions):				
Instruct	tions for feeding:						
Medi	cations and/o	r Supplements:					
	My pet has no med	ications or supplements	to be given during boarding				
	Please give my pet t	the following medication	s or supplements while board	ling.			
	I understar	nd there will be a \$5.00 f	ee per day for medications gi	ven:			
	Medications	Dosage/Strength	How many times given per day	when was the last dose given			
Flea a	and Tick preve	ention:					
	-		and tick free" facility. Therefo	ore junon arrival vour			
		, ,	ee. If you would like to avoid				
		•	ate and have Ahwatukee Com	·			
		•	rentatives include Nexgard an				
		protes prev	The state of the s				
	☐ I understand th	at my pet will be given a	flea & tick treatment upon a	rrival			
	_		rs prior to the arrival date and	d my pet received an			

Vaccinations and Services:

I have provided documentation showing my pet is current with all vaccinations.
I do not have documentation regarding pet inoculation and therefore authorize the
veterinarian to perform a physical examination on my pet and give all required vaccinations
Dogs: Rabies, Bordetella, and Distemper/Parvo
Cats: Feline Distemper and Rabies
I would also like the following services during my pets stay for an additional fee:

Item	Yes	No	Item	Yes	No
Heartworm Test			Dental Cleaning		
Fecal exam			Spay/Neuter		
Nail Trim			Microchip		
Anal Gland Expression			Examination for concerns		

If you selected examination for concerns, please specify your concerns below	lf '	you selected	examination for	or	concerns,	please	specify	your	concerns	below
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Patient Enrichment:

During your pets stay he/she will be taken out for walks twice a day. First thing in the morning at 7am when we arrive and after 4pm before we go home for the day. Playtimes have been known to be very beneficial to pets both emotionally and physically. Playtimes are separate from our general walks twice a day. Playtimes are 10-15 minutes in the middle of the day to where your pet gets one on one attention with our staff to help create bonds, give additional potty breaks and lets your pet get out of his/her room to stretch. If you would like any additional walks, playtimes, cuddle times, brush times, etc it is **\$9.00/playtime**. Your pet may enjoy up to 2 playtimes per day.

Please provide my pet with playtimes per day
My pet would enjoy the following during his/her playtime:
Check this box if you have multiple pets and would like for them to "share" playtimes
No I do not wish for my pet to receive any playtimes during his/her stay

Belongings:

We ask that you limit your pet's belongings to **five** items. We will supply your pet with food/water bowls, cleaned daily and comfortable bedding during their stay. If you wish to bring bedding for your pet, please keep in mind that it needs to be small and machine washable. Be sure all items are **labeled with your pet's name** so we may insure it also goes home with you. Ahwatukee Commons Veterinary Hospital is not responsible for personal items such as, but not limited to: collars, leashes, toys, bedding and carriers. Although every effort will be made to care for these items, ALL ITEMS ARE LEFT AT YOUR OWN RISK.

I have read the above statement and understand it, I have elected to bring the following belongings (please include all belongings even leashes and collars):

I understand that this premise does not provide 24 hour care and that my pet will be alone from 6pm to 7am on weekdays and from 12pm Saturday until 7am on Monday morning with the exception of twice daily when caregivers come in for feeding and cleaning of the kennels. I understand that all charges are due and payable in full upon release of my pet, this includes the additional options selected above.					
Client Signature:	Date:				
MEDICAL CARE	WAIVER				
MEDICAL CARE	WAIVER				
I understand that I have entrusted my pets care to Ahwa event of an urgent medical situation or illness Ahwatuke effort to contact me or my emergency contact, and in the timely manner, or if the emergency contact will not give directions on how to proceed, Ahwatukee Commons Vet treatment as deemed appropriate and in the best interest can include, but is not limited to, stabilizing care, diagnost emergency surgery. I also understand that by entrusting Hospital for boarding, I am responsible for all additional medical wellbeing while in the care of Ahwatukee Comm	e Commons Veterinary Hospital will make every e event either of us cannot be reached in a Ahwatukee Commons Veterinary Hospital erinary Hospital will proceed with medical st of the pet by the attending veterinarian. This stic tests, prescribing medications and/or care to Ahwatukee Commons Veterinary medical charges incurred to maintain my pet's				
I authorize,, who may be reached a health decisions in my absence.	at as my surrogate to make				
Full payment for all services is due at the time of discharge	ge.				
Client Signature: Please sign indicating you have read the above statemen					

SHARING ACCOMODATION WAIVER

PLEASE SIGN IF YOU WILL HAVE MULTIPLE PETS SHARING ONE KENNEL:

I voluntarily request that Ahwatukee Commons Veterinary Hospital board my pets in the same run or kennel. I understand this to mean that the animals will be housed together in the confines of the requested accommodation for the duration of their stay, unless problems arise.

I hereby voluntarily release Ahwatukee Commons Veterinary Hospital, its staff and agents from any and all responsibility or liability arising from injury or damage inflicted by one of my pets on another during their stay.

I understand that in the event of such injury or damage, I am liable for all charges of medical services provided by Ahwatukee Commons Veterinary Hospital for treatment of the said injuries or damage.

I understand that in the event of aggressive behavior directed against one of my pets by their housemate, that the pets will be separated and housed individually for the remainder of their stay and future boarding reservations. I also understand that I am responsible for any additional boarding charges that may apply under those circumstances.

I understand that pets can be unpredictable and even the most docile pets may occasionally become aggressive, bite or otherwise act in such a way that may injure them or other pets and I expressly assume the risks associated with shared accommodation boarding and release Ahwatukee Commons Veterinary Hospital of any liability arising from the same.					
Please	e sign indicating that you have read the above	Date			
For us	e by Ahwatukee Commons Staff only: please check	and initial the following before owner leaves			
	I have confirmed all parts of this authorization wire questions	th the owner and answered all of their			
	☐ I have check that all belongings that were brought in with pet are written on form and all				

belongings are labelled with pets first and last name