

Westwood Veterinary Hospital
Boarding Admitting Form

Client name: _____

Reachable number: _____

Patient name: _____ Species: _____ Breed: _____ Color: _____

Sex (include whether spayed/neutered): _____ Age: _____

Birthday (if known): _____

Are your pet's vaccines up to date? If yes, please indicate which vaccines and when last given.

If not, please indicate below which treatments you would like your pet to receive.

Canine:

- Exam
- Rabies vaccine (required)
- DHLPP vaccine (required)
- Bordetella vaccine (required)
- Rattlesnake vaccine
- Heartworm test
- Fecal test

Feline:

- Exam
- Rabies vaccine (required)
- FVRCP vaccine (required)
- Feline Leukemia vaccine
- Heartworm/FIV/Leukemia test
- Fecal test

Any vomiting, coughing, sneezing, or diarrhea? _____

Is your pet allergic to any drugs? If so, what? _____

Has your pet had any illness or injury in the past 30 days? _____

Is your pet currently on any medication? If so, what? _____

Current Diet _____

Special Feeding Instructions _____

If any problem should arise while your pet is in our care:

- You have my permission to treat my pet as required without contacting me or my emergency contact.
- You have my permission to perform only emergency and supportive care. Notify me for permission to begin any other treatment.
- You do not have my permission to treat my pet without contacting me or my emergency contact.

If any external or internal parasites are found on your pet while in our care, they will be treated at your expense.

I understand there is an additional charge for any pet deemed aggressive during the boarding period.

I will call if my "pick-up date" changes so you can plan accordingly. If I neglect to pick up my pet within 5 days of the date scheduled for discharge, and do not notify you within that time period, you may assume that the pet is abandoned and are hereby authorized to dispose of the pet as you deem best and/or necessary.

Owner _____ Date _____

Emergency contact: _____