Waverly Animal Hospital, Boarding & Grooming

233 S. Waverly Road | Lansing, Michigan 48917 | (517)323-4156 www.waverlyanimalhospital.com

FELINE BOARDING AGREEMENT

This agreement is valid for one year from this date.

("owner" refers to pet owner)

Cat's Name:	Owner's Name:	E-Mail Address:
Home Phone:	Work Phone:	Cell Phone:
Emergency Contact Name: (Other than Owner)	Emergency Contact Phone:	Authorized visitors or drop-off/pick-up (if other than owner):
Primary Veterinarian Name/Facility:	Primary Veterinarian Phone:	Permission to Obtain Veterinary Medical Records in necessary (circle): YES NO

VACCINATION AND INTESTINAL PARASITE SCREEN POLICY

To provide a healthy environment and to prevent the spread of disease among pets in our facility we require cats to be vaccinated **by a veterinarian** for the following: rabies and rhinotracheitis/calici virus/panleukopenia combination (often listed as RCP). It is highly recommended that all vaccinations be up to date at least 7 days prior to boarding. In addition proof of a negative intestinal parasite screen (IPS) in the last 12 months is required.

Rabies	RCP	IPS
Date Given:	Date Given:	Date Given:

Illness/Iniury Policy*

Should your cat develop an illness or injury during boarding or daycare medical attention by our veterinary staff is available. We will contact the numbers provided if medical treatment is deemed necessary. If no one is able to be reached the veterinary staff will use judgment in what is in your pet's best interest. Should immediate treatment be required and the owner or emergency contact is unable to be reached the owner authorizes up to the following amount: \$

Owners Signature:

Date:

-OR-

Date:

DO NOT PROVIDE MEDICAL TREATMENT until the owner or emergency contact has been reached. (In the event of a life-threatening medical condition or injury Waverly Animal Hospital will use necessary judgment and your cat may be examined or stabilized prior to owner contact).

Owners Signature:

Date:

*Treatment and testing is <u>required</u> for potentially contagious diseases or parasites (i.e. coughing, vomiting, diarrhea, fleas, etc) and owner is responsible for expenses associated with treating and diagnosing. _____(initials)

Medications and Health Conditions

Please list medications your	pet requires, there is an a	dditional fee for our med	dical staff to administer:		
Name of Medication	Quantity Given	Frequency	Time of last dose given		
Please list any medical cond	itions or health concerns yo	our cat has:			
Has your cat ever had a seiz		seizure and any treatmer	nte:		
Thas your cat ever had a seiz		Seizure and any treatment			
Please list any other pertine	nt information about your ca	at:			
	Feeding	<u>Information</u>			
1. Does your cat have food allergies?		YES	NO_		
If YES, please list the alle	0				
2. Does your cat have a hist	NO				
What food does your pet normally eat? Please list brand:					
4. How much do you feed yo	our cat and how often?				
5. Did you bring your cat's food for his/her stay? YES			NO		
6. If we are feeding your cat	s, please circle what you w	ould like us to feed:			
Science Diet Sensitive	Stomach lams Original	Other*:			

*Owner is responsible to pay for any veterinary prescription diets that are opened for their pet. Waverly Animal Hospital's staff will use their best judgment in adjusting diets for pets refusing to eat, being finicky, or those that lose weight during their stay. _____. (Initials)

Boarding Disclaimers and Provisions

- 1. Boarding is charged by the night, regardless of the time the pet is admitted or released. There is a minimum charge for one night of boarding.
- Pets must be picked up during hours of business; discharges after hours are not allowed. 2.
- Personal items are left at owner's risk. We are not responsible for loss or damage. 3.
- 4. There is an additional fee for medication administration.
- 5. There are additional fees for bath, brush, and nail trims, professional grooming, and extra playtimes.
- Waverly Animal Hospital reserves the right to refuse any cat at check-in if appears sick or its behavior 6. jeopardizes other pets or our staffs' safety.
- Waverly Animal Hospital reserves the right to refuse or ban cats from certain activities or the facilities. 7.
- Owner agrees to pick up pet on the scheduled day or to notify Waverly Animal Hospital if reservation needs 8. to be extended. The pet will be considered abandoned if owner fails to pick up pet within 10 days of receiving abandonment letter to the address provided to Waverly Animal Hospital. Waverly Animal Hospital will handle pet in accordance with Michigan state law. Abandoning pets does not relieve owner of financial obligation to Waverly Animal Hospital.
- Owner certifies that to the best of their knowledge all behavior and medical information on this statement is 9. true.
- 10. Owner agrees to make complete payment to Waverly Animal Hospital, Boarding and Grooming at the time of discharge. Waverly Animal Hospital reserves the right to request payment/deposits at their discretion.

I HAVE READ, UNDERSTAND AND AGREE TO ALL PROVISIONS OF THIS AGREEMENT

Client/Owner Name: _____ Signature: _____ Date: _____