

Escatawpa Animal Clinic
Boarding Admission Form

Owner's Name: _____ **Date:** _____

Pick Up Date: _____ **Morning / Afternoon ?**

Pet's Name: _____ Breed: _____ Sex: _____ DOB: _____
Color: _____

Pet's Name: _____ Breed: _____ Sex: _____ DOB: _____
Color: _____

Pet's Name: _____ Breed: _____ Sex: _____ DOB: _____
Color: _____

Pet's Name: _____ Breed: _____ Sex: _____ DOB: _____
Color: _____

Medications to be given:

Pet _____ Med _____
Dosage _____ Frequency _____

Pet _____ Med _____
Dosage _____ Frequency _____

Special feeding/diet instructions:

Services Requested at an additional charge:

() Physical Exam (\$30)-- Reason for exam: _____

() DA2LPP (\$32.80) () Heartworm Test (\$27.50) () FVRCP (\$18.10)

() Bordetella (\$18.45) () Feluk/FIV Test (cats only) (\$35.50) () Feluk (\$34.30)

() Fecal (\$12.00) () Dental Cleaning (requires sedation-- price varies) () Rabies (\$15 - \$25)

() Bath (\$25 - \$40) () Nail Trim (\$10)

() Other: _____

All animals entering the clinic must be current on all vaccinations and free of internal and external parasites.

Owner is responsible for all fees associated with updating vaccinations and the treatment of any parasites.

If a tranquilizer is necessary for treatment or handling, I give permission to Escatawpa Animal Clinic to administer such medications.

All reasonable efforts will be made to prevent injury or escape of the pet. Escatawpa Animal Clinic is not responsible for the actions of a pet that cause injury or escape.

Occasionally during or soon after boarding, some pets will develop mild stress related illnesses such as diarrhea, vomiting or cough. In the unlikely event this occurs our veterinarians can provide appropriate medical attention and/or advise. Clients will be responsible for all fees associated with medical care during and after boarding.

Pets must be picked up on scheduled discharge date. Pets may be picked up during normal hours of operation.

As per MS regulations pets will be considered abandoned if not picked up within 7 days of the last day of the boarding reservation.

Signature of owner/representative: _____

Date: _____

Printed Name: _____

Phone Number in case of
emergency: _____