



BOARDING ADMISSION FORM

Owner's Name: _____

Pet's Name: _____ Dog Cat Other

Pet's Name: _____ Dog Cat Other

Please check Yes or No: Yes No

On Heartworm Prevention?

Illness in the last 30 days?

On Medications? → Medication(s): _____

Rx Directions: _____

Special Diet? → Food: _____

Instructions: _____

Our office hours are Monday through Friday from 7 a.m. to 6 p.m., Saturdays from 7:30 a.m. to noon, and closed Sunday. Monday through Friday after 2 p.m., you will be charged an additional night of boarding unless your pet is scheduled for a bath or groom, which is an additional charge. If picking up on Sunday, you will be charged for that day.

Pick Up Date: ____ / ____ / ____

Upon Departure:

Bath: Yes No

Groom: Yes No → **Please fill out grooming instructions form.*

Pick Up Time: 2 p.m. 3 p.m. 4 p.m. 5 p.m.

Saturday pick up baths will be ready by 11 a.m.

Sunday pick up 6-6:15 p.m. (BY APPOINTMENT ONLY)

OWNER RELEASE:

I certify that I have read the policies and procedures list provided to me by Hill Country Animal Hospital. The clinic and staff will **NOT** be held liable for any problems that develop provided reasonable care and precautions are followed. I understand that **ANY** problem that develops with my pet while I am absent will be treated as deemed best by the veterinarian, and **I assume full responsibility for the treatment expense involved.**

Today's Date: _____ Owner Signature: _____

Owner Contact Number: _____ Emergency Contact Number: _____