

# Haile Plantation Animal Clinic

## Cat Boarding Registration

Reservation dates from to

Toys or personal belongings:

Does your cat have any behavioral or medical problems we should be aware of?

Is your pet currently on medications including, heartworm prevention and flea and tick prevention? If so, when were the medications last administered?

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### Emergency contact and phone:

#### Diet:

**Kennel Diet (Science Diet)**

**Own food:**

#### Feeding Schedule:

Amount to be fed:

Twice daily (AM/PM)

Once daily

Other

Did your cat eat today before arriving? yes no

Your cat must be free of internal and external parasites. Your pet will receive a boarding examination upon arrival to check for any fleas or ticks. If your pet has fleas we will have to give him/her a capstar at your expense. We are sorry, but if your pet has ticks, you will need to make other arrangements for boarding your pet. Please note that many vaccines do not take affect for 3-7 days, so be sure your cat is vaccinated before boarding for optimal wellness. Haile Plantation Animal Clinic requires Rabies and FVRCP for boarding. If your pet becomes ill during his/her stay, we will make every attempt to contact you regarding examination, treatment, and associated costs as we want to ensure that your pet is comfortable and healthy during their stay with us.

Haile Plantation Animal Clinic is not responsible for any items such as blankets, beds, toys, leashes, or collars that may be dropped off with the pet for boarding. Haile Plantation Animal Clinic will not be held liable or

responsible in any manner whatsoever or in any circumstance regarding the care, treatment, or safekeeping of the pet described

All fees are due at the time that services are rendered, and the owner accepts full responsibility for the payment of the services rendered or ordered. No animal will be released from the hospital until full payment is made. Any animal not picked up within 10 days of the date designated for the animal's release shall be considered abandoned by the owner and full authorization and title shall immediately transfer to Haile Plantation Animal Clinic.

I am the owner of the above named pet, and I understand that if my pet is not up to date on his/her vaccinations at the time of boarding, they will be given by the doctors and staff at Haile Plantation Animal Clinic. I also authorize Haile Plantation Animal Clinic to examine and treat my pet if my pet becomes ill (i.e diarrhea, coughing, vomiting, limping, ear or skin infections, etc.) during his/her stay. I also agree to pay for such treatments or diagnostic tests that the doctors at Haile Plantation Animal Clinic feel are absolutely necessary for the comfort of my pet. If I am not the owner of the animal, I also represent that I have full authority to bind the owner to this agreement.

### TLC Package

YES! I want to pamper my cat with a TLC package for an additional \$11.00 per day. It includes a private 10 minute play session with a caring member of our staff outside of cage (only if kitty wants to play) and a morning and afternoon treat (not appropriate for cats on therapeutic diets).

We can also send you electronic updates with the purchase of the TLC package for no additional charge. Please select one option for your pet's stay.

I would like daily e-mail updates

**(You will not receive an email on the first day of check-in)**

**~OR~**

I would like daily pictures. Please leave us your cell number and we will text you updates.

Yes you have my consent to feature my pet on facebook once during his or her stay.

Rent a fleece pet bed for your pets comfort (especially good for older, arthritic pets) Only \$5 a visit!

**HOLIDAY BOARDING:** I have been made aware that when applicable, I will be charged one night of Holiday Boarding for an additional \$11.00 during my pet(s) stay. This is in addition to the regular boarding nights my pet(s) will be in the care of Haile Plantation Animal Clinic .

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Initial:

**IMPORTANT:** If my cat has a serious illness or injury, and in the event such illness or injury becomes critical during my absence and I cannot be contacted, I want the doctors and medical team of HPAC to begin medical treatment immediately.

YES

NO

Signature:

Date: