



Ingleside Animal Hospital
5130 E. Thomas Road
Phoenix, AZ 85018

Boarding Agreement

Date: _____

1. Owners Name: _____ Pet's Name _____

2. Emergency # _____ Secondary Emergency# _____

3. Board From: _____ to _____

MEDICATIONS

Is your pet on medication YES / NO (*if no medications proceed to question 4*)

(Dispensing medication/supplements will incur an **ADDITIONAL** \$____ charge per day)

► **ALL NEW PATIENTS THAT ARE ON MEDICATION WILL REQUIRE A PHYSICAL EXAM**

Medication _____ Dose mg/cc _____

Frequency 1x/day 2x/day 3x/day Other _____

Medication _____ Dose mg/cc _____

Frequency 1x/day 2x/day 3x/day Other _____

Medication _____ Dose mg/cc _____

Frequency 1x/day 2x/day 3x/day Other _____

DIETS

4. Is your pet on a special diet YES / NO Name: _____ Feed 1, 2, 3, X daily

(*Boarders are fed Eukanuba Low Residue unless otherwise specified)

BELONGINGS

5. Leash Collar Carrier Toy Bedding Food Medication

(Please note we take all reasonable care of personal items you leave with your pet; however we cannot be held responsible for loss or damage.)

VACCINE HISTORY

*Inglerside animal Hospital requires all pet's vaccinations to be current or owner **MUST** provide documentation as proof thereof. Bordetella is required for dogs once a year. If your pet is not current at time of admission, or we have not been given current records, a doctor will examine and administer the following vaccinations at the owner's expense.*

Canine: Bordetella - call for current pricing
DA2PP - call for current pricing
Rabies - call for current pricing
Tick dip (if not on preventative) - call for current prices

Feline: FVRCP - call for current pricing
Rabies - call for current pricing

OTHER:

(if requested) AVID microchip - call for current pricing
Heartworm Test - call for current pricing
Fecal - call for current pricing

Leukemia - call for current pricing
Fecal - call for current pricing

*Dogs will receive a **TICK DIP** or **SPRAY** at the cost of \$10.50 upon arrival, unless a **TICK DIP** or preventative treatment has been performed in the last 14 days. If fleas are seen on your feline, we will treat them with a **FLEA SPRAY** at the cost of \$9.00.*

- Would you like the doctor to examine your pet for any other problem(s) while boarding? YES/NO

If yes, please explain the problem:

MEDICAL ILLNESS POLICY

The Doctors will make every attempt to call the emergency number listed above in the event of any medical problems. If no one can be reached however, please indicate your wishes should your pet require treatment to relieve immediate discomfort or to resolve an important medical condition:

Perform whatever treatment the doctor deems necessary.

Do not administer any medical treatment until specific authorization is given.

BOARDING CHARGES PER NIGHT- call for current pricing

Canine 0-29#	Feline	Avian Small	Reptile
Canine 30-75#	Ferret	Avian Medium	
Canine 76-180#	Rabbit/Guinea Pig	Avian Large	

** I understand that animal supervision is during regular business hours and on designated times during the weekends and holidays.*

Owner/Agent _____

OFFICE USE ONLY: Checked in by _____
Weight _____

Hospital Hours:

Monday – Friday 7:00am to 6:00pm

Saturday 8:00am to 3:00pm

Closed Sundays and Holidays