LINDERMAN ANIMAL HOSPITAL – BOARDING RELEASE FORM

Owner's name:	Pet name:
Emergency Contac	t/Phone
Arrival Date:	Expected Departure Date:
Does your pet have	medications that need to be given? If so, please list them here in detail.
Did you bring any p	personal items (blankets, food, toys, etc.)? If so, please list them here:
Annual Vaccines _ Ear Cleaning	v services performed while your pet is boarding? Nail TrimExpress AGBath Permanent ID w/MicrochipOther (explain) procedure (please explain)
Animals ma	by be picked up only during our normal office hours. We are open Monday

Animals may be picked up only during our normal office hours. We are open Monday through Friday from 8:00 a.m. to 5:30 p.m., Saturday from 8:00 a.m. to 12:00 noon, and Sunday and holidays from 9:00 a.m. to 10:00 a.m.

I understand that:

- local laws require all cats and dogs to be current on Rabies vaccinations.
- additionally, it is the policy of Linderman Animal Hospital that all dogs boarding with us have current DHP-PV (<u>Distemper</u>, <u>Hepatitis</u>, <u>Parainfluenza</u>, <u>ParvoVirus</u>) and Bordetella vaccinations and that cats have current FVRCP (<u>Feline Viral Rhinotracheitis</u>, <u>Calicivirus</u>, <u>Panleukopenia</u>) vaccinations.
- if vaccines were given elsewhere, it is my responsibility to provide evidence of this to Linderman Animal Hospital before leaving my pet.
- if the hospital does not receive records that show that my pet is current on these vaccines, they will be administered and I will be responsible for paying for them.

I hereby authorize Linderman Animal Hospital to perform any emergency procedure(s) or test(s) on my pet while in their care if I or other authorized parties cannot be contacted. I understand that Linderman Animal Hospital will not be held responsible for injuries, illnesses, or loss of the above pet if said injury, illness, or loss occurs while in the course of normal routine care and that my animal will be treated for fleas or other external parasites if found on arrival at the expense of the owner.

I have read the foregoing and agree to all conditions mentioned above. I also state that I am the owner of (or agent for the owner of) the above-named animal. I understand that full payment is due at the time of pickup.

Date*: ______ *This release is valid for one year

SIGNATURE