



## PET BOARDING ADMISSION FORM

*Please print legibly*

Admission Date: \_\_\_\_\_ Pick-Up Date: \_\_\_\_\_

Owner: \_\_\_\_\_ Pet(s) Boarding: \_\_\_\_\_

Phone number(s) where you can be reached while your pet is boarding with us: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### PET INFORMATION

What is your pet's current diet? \_\_\_\_\_

Is your pet currently taking any medications/supplements? Yes  No

If yes, what and how often? \_\_\_\_\_

List all items you brought with your pet (food, bedding, carrier, leash, etc.): \_\_\_\_\_

Would you like your pet to be given an oral probiotic while boarding to help prevent stress-induced gastrointestinal upset (additional \$1.00/day)? Yes  No

Is there anything else that needs to be checked or done for your pet while they are here boarding? (bath, dentistry, blood work, etc.) \_\_\_\_\_

I authorized my pet(s) to be discharged to the following person (if I am unable to personally pick up): \_\_\_\_\_

*I understand that all pets being boarded at Waynedale Animal Clinic must be current on vaccinations and free of internal and external parasites. If parasites are detected while my pet is boarding, I authorize Waynedale Animal Clinic to provide appropriate treatment and I take full responsibility for any associated costs. I also authorize Waynedale Animal Clinic to do whatever they feel is necessary to care for my pet in the case of illness or emergency. I understand that charges may be incurred for any additional services that are performed.*

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Hugh S. Glidewell, DVM Andrew W. Riebe, DVM**

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