Newberg Veterinary Hospital
**BOARDING ADMISSION FORM**

We strive to provide the best in boarding care for your pet!

Owner: ___________________________ Pet: ___________________________

Check-in date: ___________________ Pickup date: ___________________ AM __ PM ___

In case of emergency, I can be contacted at: __________________________

A TECHNICIAN WILL PERFORM A BRIEF ASSESSMENT OF YOUR PET (AT NO CHARGE) WHILE THEY ARE HERE WITH US. MAY WE CONTACT YOU WITH THEIR FINDINGS? YES   NO

1. Does your pet need a bath or professional grooming while here? YES   NO  Toenail trim? YES   NO
   (If YES for bath/groom, please pick up your pet in the afternoon to ensure that they are dry and ready to go home.).

2. Feeding instructions for your pet while boarding: Once per day  Twice per day  Free Choice

3. Does your pet require a special diet? If so, please list name of diet: __________________________
   (If your pet is on a special diet, please bring that diet with you.).

4. Medications to be given to your pet while here:
   1) ____________________________  2) ____________________________

5. Special instructions for your pet while here: __________________________

6. Problems/concerns with your pet that require our attention: __________________________

ALL PETS MUST BE CURRENT ON THEIR VACCINATIONS. Proof of these vaccinations is required upon admission to the hospital for boarding. If vaccinations were given at another facility, please bring the proper information with you when you check in. ALL PETS NOT CURRENT ON THEIR VACCINATIONS WILL BE BROUGHT UP-TO-DATE WHEN THEY ARE ADMITTED INTO THE HOSPITAL. THESE CHARGES WILL BE ADDED TO THE BOARDING CHARGE. THERE WILL BE NO EXCEPTIONS TO OUR POLICY. THIS IS TO ENSURE THE SAFETY OF YOUR PET, AS WELL AS OTHERS IN THE FACILITY.

✓ If an emergency or illness arises while your pet is boarding with us, your pet will be treated accordingly and the charges will be added to the boarding charge.

✓ All pets must be free of external parasites. If fleas are present, they will be treated upon arrival at an additional cost.

Please do not bring personal items such as bedding, blankets, toys or leashes (with the exception of cat carriers). Please note under Special Instructions if your pet has special needs and our staff will gladly tend to their needs. If a personal item is left behind, we are not responsible for its safe return.

CHECK-OUT TIME IS DURING REGULAR BUSINESS HOURS ONLY:

Mon-Thurs  8:00 a.m.-8:00 p.m.  Fri & Sat  8:00 a.m.-5:30 p.m.  Sun 9:00 a.m.-1:00 p.m.

PAYMENT IS DUE IN FULL AT THE TIME YOUR PET IS RELEASED FROM THE HOSPITAL.

If I neglect to pick up my pet or contact Newberg Veterinary Hospital within 5 days from the above stated pickup date, Newberg Veterinary Hospital will assume that my pet has been abandoned and will follow protocol in the best interest of the animal. I understand and agree with the above stated information:

Owner’s Signature: ___________________________ Date: ___________________________

TECHNICIAN BOARDING ASSESSMENT:
Worming: _____  Ears: _____  TNC: _____  Fleas: _____  Teeth/Grade: ____________________________
Owner called: _____  Spoke with: ______________  Owner authorized/declined treatment.  Initials: _______