

Welcome to Countryside Animal Clinic of DeLand, LLC
Boarding Information Sheet

Last Name: _____ Pet's Name: _____

Boarding Dates: _____ to _____ Pet's Weight _____

Feeding Instructions *please check one:* kennel food () own food () _____
How much? _____ How often? _____
Does pet need feeding this morning? _____ ...this evening? _____

Medications *please check one:* owner supply () refill needed () hospital supply ()
List Medications _____

Does pet need medicating this morning? _____ ...this evening? _____

Belongings We will provide food, toys, treats, bowls, and bedding for your pet, therefore it is not necessary for you to leave these items. Although we will do everything to protect your belongings, *we are not responsible for damage or loss of items* Please list all items, in detail, left with your pet

Services Requested: (regular fees apply) bath () surgery () other _____
doctor examination with Doctor Bryson () Cunningham () Lewandowski () Mitchell () Parker ()

Please note if your pet has a medical condition or illness. _____

INITIAL

_____ For the protection of all the pets and staff at Countryside Animal Clinic, each animal that boards will be given vaccinations if needed and regular fees will apply. Dogs must be up to date on Rabies, Distemper, and Influnza vaccines, and both the kennel cough vaccine and intranasal bordatella. Intestinal parasite testing is required every 6 months for all boarding dogs, and if test results are positive, your pet will be treated. Cats are required to have yearly Rabies, Distemper, and Leukemia vaccinations, and a Feline Leukemia and Aids test.

_____ Your pet will receive a brief complimentary exam and nail trimming. Medication and medical care, including any emergency care, will be administered to your pet if it is in our professional medical opinion necessary for the comfort and well being of your pet and a healthy environment for other pets. Regular fees will apply.

_____ If there is any evidence of fleas or ticks found on your pet, a bath, flea pill, topical, or appropriate treatment will be given. Regular fees will apply.

_____ Complimentary baths are given to dogs after a minimum of 4 nights, if your dog does not board for 4 nights and you request a bath, regular fees will apply. If you request a doctor examination, regular fees will apply.

_____ I give Countryside Animal Clinic permission to take and use photographs of my pet for any lawful purpose including publishing in print and/or electronically.

All services will be rendered at our normal fee and payment will be due in full at the time your pet is discharged.
If you have read and agree to the policies of Countryside Animal Clinic of DeLand, please sign below as owner or agent.

Signature _____ ***BEST Emergency Contact #** _____

for office use only
Checked In By _____ Checked Over By _____