

BOARDING ADMIT FORM

_____ (pet's name) is scheduled to board at Mission Viejo Veterinary Hospital starting _____ and will be picked up on _____.

While here, my pet will need the following:

Medication: Please circle: **Yes or No** Name and dose of Medicine: _____

Given ONCE or TWICE daily? _____

HAS or HAS NOT been given today? _____

Food: circle all that apply:

Puppy / Adult / Senior / Dry / Canned / I am providing my pet's food

Amount per day in cups: _____ Once daily / Twice daily / Free Feed

Vaccination Information:

DOGS		CATS	
Vaccination:	Date Vaccinated:	Vaccination:	Date Vaccinated
Bordatella (kennel cough)	_____	Rabies	_____
DHPP (dogs)	_____	DRC	_____
Rabies 3yr (dogs)	_____	Leukemia	_____
Rabies 1yr (dogs)	_____		

Circle any other services you would like for your pet while is here:

Nail Trim Dental Lab work Micro Chip

Special instructions for my pet: _____

Due to sanitary reasons, Mission Viejo Veterinary Hospital does not accept any bedding material (blankets, beds, towels, etc.), toys (including bones) or dishes.

I give my permission to the doctors and staff of Mission Viejo Veterinary Hospital to treat and medicate my pet if he or she becomes ill during the stay. I understand that additional charges will be incurred if my pet needs medical attention.

Signature and date

Contact name and phone number 1 _____

Contact name and phone number 2 _____