

Client/Pet Label

# Wolftever Pet Hospital Boarding Form

Email address: \_\_\_\_\_

Emergency Contact/Number: \_\_\_\_\_

Admission Date: \_\_\_\_\_ Discharge Date \_\_\_\_\_

Medication: \_\_\_\_\_ Dose: \_\_\_\_\_ Time of last dose: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date														
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
Meds														
Date														
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
Meds														

**FOOD:** \_\_\_\_\_  
*E – Empty Bowl      L – Food Left      S – Some Food Left      \* - No Feeding*

Date														
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
Food														
Date														
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
Food														

1 on 1  \_\_\_\_\_  
P/S  \_\_\_\_\_  
BATH  \_\_\_\_\_

**BELONGINGS:**

Please note that Wolftever Pet Hospital will be glad to accept any special toys, beds, collars, etc. to stay with your pet. However, we will not be responsible or liable for any lost or unreturned items. \_\_\_\_\_ (Initials)  
Other services (bath, vaccinations, etc.) are not included in board fee.  
I authorize Wolftever Pet Hospital to do whatever is necessary, lab test, X-Ray, or surgery should an emergency situation arise. If tranquilization is necessary for treatment or handling, I give my permission to administer such medications.  
All animals entering the hospital must be up-to-date on vaccinations and free from external parasites (fleas, ticks, etc.) or they will be treated upon entry at owner's expense.  
Pets are to be released only during regular office hours. Sunday is a courtesy pick-up. You will be charged for Sunday night.

Client Signature \_\_\_\_\_ Date \_\_\_\_\_ Admitting Tech/Witness \_\_\_\_\_