

## **Bressi Ranch Pet Boarding**

Owner's Name: \_\_\_\_\_ Pet's Name \_\_\_\_\_

Check In Date: \_\_\_\_\_ Check Out Date: \_\_\_\_\_ Pick up time: \_\_\_\_\_

Best number to contact you while you are gone: \_\_\_\_\_

Alternate emergency contact person and number: \_\_\_\_\_

FOOD: Please provide your pet's **brand/type** of food and feeding schedule:

Dry: \_\_\_\_\_ Amt per meal: \_\_\_\_\_ Frequency: \_\_\_\_\_

Wet: \_\_\_\_\_ Amt per meal: \_\_\_\_\_ Frequency: \_\_\_\_\_

Treats: \_\_\_\_\_ Quantity: \_\_\_\_\_ Frequency: \_\_\_\_\_

Special Feeding Instructions: \_\_\_\_\_

**If your pet runs out of his/her food, we will substitute with a comparable diet found here at the hospital or local pet store and a charge will be added to your account to be paid upon pick up.**

Food allergies: **YES/NO** Allergic to: \_\_\_\_\_

**NEW medical history** that we need to be aware of?

\_\_\_\_\_

What **personal belongings** are you bringing with your pet? **(detailed description please):**

Collar/Leash/Harness: **YES/NO** \_\_\_\_\_ Carrier: **YES/NO** \_\_\_\_\_

Bedding: **YES/NO** \_\_\_\_\_ Bags: **YES/NO** \_\_\_\_\_

Toys: **YES/NO** \_\_\_\_\_

Other: \_\_\_\_\_

Is your pet friendly with other animals? **YES/NO**

Would you like your pet to participate in communal playtime? **YES/NO**

Is your pet "food aggressive"? **YES/NO**

Is your pet friendly with people? **YES/NO**

**\*Signature and initials on back\***

## Bressi Ranch Pet Boarding

I understand that during my pet's stay at the Bressi Ranch Pet Boarding facility, unforeseen conditions may arise necessitating an extension or variance in the care my pet(s) will be given. **I authorize the veterinarian(s) of Bressi Ranch Pet Hospital to do whatever is deemed advisable for the benefit of my pet(s) health** [redacted] (initials) **Every effort will be made to contact you, the owner, prior to treatment.** In the event you are unable to be reached and the pet(s) is in immediate danger, we will treat your pet(s) without your verbal authorization. I understand that by the signing of this paper, if this circumstance were to arise, I the owner accept ultimate responsibility for the cost of the treatment.

I understand that during my pet(s) stay at the Bressi Ranch Pet Boarding Facility; if it is made aware that my pet(s) has evidence of a flea infestation, I authorize Bressi Ranch Pet Hospital to administer flea treatment at their discretion. I understand that if this circumstance were to arise, I the owner accept ultimate responsibility for the cost of the flea treatment.

I understand that during my pet(s) stay at the Bressi Ranch Pet Boarding facility that there are times in which my pet will be unsupervised, but the staff will take every precaution to maintain the health and safety of my pet during its stay with Bressi Ranch Pet Boarding Facility. *\*Holiday boarding schedule may vary\**

Bressi Ranch Pet Hospital will provide bedding, bowls, and toys for my pet(s) while I am gone, I will provide my pet(s) diet and medications. *If I chose to leave my own belongings for my pet(s), I understand that Bressi Ranch Pet Hospital is not responsible if my personal belongings become lost or damaged.*

**Vaccination Policy** Bressi Ranch Pet Hospital requires dogs be current on all vaccinations prior to being admitted for boarding. **If needed, I understand the following vaccines will be administered to my dog(s) upon check in for boarding** [redacted] (initials)

Bordetella     Rabies     DA2P     Canine Flu     None

[redacted]

Date

[redacted]

Signature

*\*If your dog is boarding with us for over 5 nights, he/she will receive a complimentary bath upon exit\**