



Boarding Contract

Owner Agrees To: Ensure their pet(s) is current on required vaccinations and free from external parasites prior to boarding or these will be corrected and fees for procedures will be charged accordingly (payment due at time of dismissal). By signing below you are allowing Aspen Grove Veterinary Care (AGVC) to provide necessary medical care in the case of an emergency or to prevent transmission of parasites, virus, or infection if we are unable to contact the responsible party. Although AGVC does everything possible to prevent transmission of infectious disease (i.e: kennel cough), we cannot be responsible should illness occur.

Drop Off Date: _____ Pickup Date: _____ Time: _____

Client Name: _____

Pet(s) Name: _____

PLAYTIME INSTRUCTIONS

Does your pet get along with other animals? Yes No

Do you wish to have your pet free play in the yard with other dogs during playtime? Yes No

Special Instructions: _____

FEEDING INSTRUCTIONS

Own Food AGVC Food (if not specified, we will feed your pet our in-house diet)

Instructions: _____

MEDICATIONS

Does your pet have a chronic medical condition? Yes No

If yes, please explain: _____

1. _____ Dose: _____

Directions: _____

2. _____ Dose: _____

Directions: _____

3. _____ Dose: _____

Directions: _____

OWNER'S PROPERTY

Please check everything you're dropping off.

Leash

Color: _____

Bedding

Description: _____

Food / Measuring Cups

Description: _____

Medications / Supplements

Description: _____

Other

Description: _____

EMERGENCY CONTACT

Responsible Party: _____

Phone: _____

Alternate Phone/Email: _____

Client Signature: _____

Payment, in full, is required at time services are rendered. We accept Cash, Checks, MasterCard, Visa, and Discover. Care Credit is the only payment plan we offer.

Boarding Policies

By signing below you acknowledge that you have read and understand the boarding policies and prices of Aspen Grove Veterinary Care and will comply with each. You further acknowledge that you have been encouraged and provided the opportunity to discuss all your questions and concerns and they have been answered to your satisfaction.

First-time Boarders

(initial)

All first-time boarders will be charged a one time fee of \$15 for the following requirements:

- Brief health exam by our veterinarian
- One-on-one personality assessment

Vaccination Requirements

(initial)

I verify that my pet(s) have been vaccinated by a veterinarian and are up to date on the following vaccines:

Dogs

- 1 or 3 year Distemper/Parvo; 1 or 3 year Rabies; Bordetella

Cats

- 1 or 3 year Distemper/Upper Respiratory Combo; 1 or 3 year Rabies

Boarding Charges

(initial)

I understand and agree to pay the following charges.

- I understand I will be charged for the day I drop off my pet(s), regardless of the time of day they arrive.
- I understand that if I pick up before noon (12:00 pm) I will not be charged for the day they leave.
- I understand that I pick up after noon (12:00 pm) I will be charged for the full day.

Boarding Prices

(initial)

- Dog Boarding: \$22 per day (per dog)
- Cat Boarding: \$14 per day (per cat)
- Over 7 days Dog Boarding: \$22 per day (first 7 days); \$19.50 per day (all subsequent days)
- Over 7 days Cat Boarding: \$14 per day (first 7 days); \$12 per day (all subsequent days)
- Administering medications: \$2.00 per day (per pet)

Pick up Times

(initial)

I know and understand when the times available to pick my pet up are: Monday - Friday: 8:00 am - 5:30 pm; Saturday: 8:00 am - 12:00 pm and Sunday: 5:00 pm (pick up only).

Group Play Consent

(initial)

I understand that during playtime my dog will be playing in a group with other dogs. Although the staff of Aspen Grove Veterinary Care will closely supervise all boarders, I understand and accept that play behavior, unknown or undocumented aggression, or participation in routine daily activities can lead to altercation or injuries. I willingly assume all risks of and responsibility for the costs to treat any injuries my dog(s) sustain while boarding at this facility. I further understand and accept that the owners and staff will not be held liable for any injuries or deaths sustained by my dog while under the care of Aspen Grove Veterinary Care.

Emergency and Medical Treatment Authorization

(initial)

I understand that while Aspen Grove Veterinary Care takes all reasonable steps to avoid communicable diseases, there is still a small risk of acquiring a communicable disease while boarding. In the event my pet(s) contracts such a disease while boarding, I assume all the risks and accept the responsibility for the costs of all treatments. I further agree to hold the owners and staff of Aspen Grove Veterinary Care harmless from expenses incurred for such treatment.

I understand and agree that if the need arises, emergency medical treatment for my pet will be provided by the doctor(s) and staff of Aspen Grove Veterinary Care and I agree to pay all reasonable costs associated with such treatment.

I understand that someone from Aspen Grove Veterinary Care will attempt to notify me at the phone number(s) I provide and that if I, or my agents, cannot be reached in a reasonable amount of time I authorize the doctor of this facility to make all medical decisions for my pet.

Health & Personality Acknowledgement

(initial)

I verify that the pet(s) on this contract are in good health and to my knowledge have not shown any clinical signs of any communicable disease or parasite within the last 14 days. I further verify that they have not caused harm to or shown aggression or threatening behavior towards people or other dogs. I have discussed and made the doctor(s) and staff of Aspen Grove Veterinary Care aware of any health or personality concern I have regarding my pet(s).

Signature