

- All pets left for boarding must be current on all required vaccinations **including Rabies, Distemper, and Bordetella.** They must have a negative **fecal examination** within the past year. They must also be free of fleas and ticks, or they will be treated on admission at the owner's expense.
- Please be assured that while boarding if your pet experiences any mild digestive issues we will monitor and treat as necessary. We will speak with you regarding these issues when you pick up your pet.
- For any condition other than a minor problem, Mayfair Animal Hospital will provide medical treatment and an attempt will be made to contact you at the emergency number you have provided us.
- Every pet is walked at least twice a day and provided any special diet or treats you wish to bring. Pets that do not require special diets will be fed appropriate of amounts Science Diet Sensitive Stomach.

****Please ask our staff about our prices for these additional boarding services.**

Bath – *includes a nail trim, ear cleaning, anal gland expression* **YES** **NO**
 (Price determined by pet's weight)

	YES	NO	
Frosty Paws for Canines	<input type="checkbox"/>	<input type="checkbox"/>	___ per day or ___ per stay
Cuddle Time – (10 min.)	<input type="checkbox"/>	<input type="checkbox"/>	___ per day or ___ per stay
Canine Individual Playtime (15 min.)	<input type="checkbox"/>	<input type="checkbox"/>	___ per day or ___ per stay
Pool Time	<input type="checkbox"/>	<input type="checkbox"/>	___ per day or ___ per stay
Feline Individual Playtime (10 min.)	<input type="checkbox"/>	<input type="checkbox"/>	___ per day or ___ per stay
Coat Brushing – (10 min.)	<input type="checkbox"/>	<input type="checkbox"/>	___ per day or ___ per stay
Teeth Brushing – canine or feline	<input type="checkbox"/>	<input type="checkbox"/>	___ per day or ___ per stay

Boarding Registration Information

(complete one form for each pet)

Beginning boarding date _____ a.m. / p.m. Pick up date _____ am. / pm.

(If your pet is having a bath they must be picked up after 3:00pm)

Pet Name _____ Owner's name _____

Emergency Contact Numbers (at least 2) (____) _____ (____) _____

Personal items that I brought for my pet are _____

***Please note Mayfair Animal Hospital cannot be responsible for lost or damaged personal items. We cannot keep your leash or collar unless your pet needs it due to a medical condition.**

MEDICAL CONDITION

Please note all health issues for your pet

MEDICATIONS

*If your pet is given medications while boarding there is a small additional fee added to the standard boarding rate. Medications must be in their original pill vials or containers.

Name of Medication	Dose Given	Frequency	Time last given

FEEDING INSTRUCTIONS

My pet's current food is _____ I have brought food for my pet **YES NO**

Please feed him/her _____ (amount) _____ **x per day.**

My pet last ate at _____:_____ **AM / PM**

My pet is on a **restricted diet** for (*please circle*) medical reasons / stomach sensitivity / skin allergies / other

My pet is allowed to have treats while boarding. **YES NO**

***I have requested vaccines or other medical services while my pet is boarding and the required information and permission forms for these services have been provided to me.**
YES N/A

*** I understand and agree to the boarding requirements and policies of Mayfair Animal Hospital. *Signature _____ Date _____**