

### P: 650.583.5039 F: 650.763.8620

1111 El Camino Real, San Bruno, CA 94066 | sanbrunopet.com

# **Boarding Agreement**

Animal Information					
Pet Name:			Owner Name:		
Arrival Date: _	Dep	oarture Date:	Species:	Breed:	
Age:	Sex:	Weight:			

#### You must agree to the following terms to board your pet at San Bruno Pet Hospital.

San Bruno Pet Hospital is pleased to welcome you and your pet to our Boarding Resort. Boarding is conditional upon your reading, understanding, and agreeing to the terms and conditions explained below. This agreement will apply to all future boarding stays. Please inquire office personnel if there is anything you do not understand or for which you would like further clarification. Thank you for taking the time to understand our policies and procedures now, prior to leaving your pet with us.

#### 1. Daily Charges

Daily Charges Daily charges apply for all animals for the day they arrive regardless of arrival time and include two walks per day. Additional charges will apply for every individual administration of medication, for medical services, and grooming, whether it is requested by the owner or required by the staff for the comfort or well being of the pet.

#### 2. Veterinary Medical Needs and Fees

If our boarding/medical staff believes a pet requires veterinary medical attention for any reason, we will schedule the pet for an examination with the attending veterinarian. All services required will be paid for by the pet owner regardless of the nature of the veterinary services- whether it is a result of signs or symptoms of contagious, infectious disease, parasitic infection or the result of an injury. Sometimes we must make decisions regarding care in your absence. We have your pet's best interest in making these decisions, and as a condition for boarding, require the authority to make decisions for you to render services for which you will be charged. I will be contacted first, and if I am unable to be contacted, I authorize San Bruno Pet Hospital to do any necessary treatment they see fit. Initials

#### 3. Examination, Vaccination, and Parasite Control Policy

All pets entering the boarding center must be current on all required vaccinations, have had an exam by a veterinarian in the past year, and free of external parasites. We recommend all pets be vaccinated a minimum of 2 weeks prior to boarding. Failure to do so may lessen their effectiveness. If you do not have proof of examination or vaccination at the time of arrival, we will examine and vaccinate your pet and you will be charged for an examination and any necessary vaccines required by the attending veterinarian. If external parasites are noted on your pet, treatment will be applied and additional charges will apply.

If your pet has not received a flea prevention within the last 30 days, we will apply a product for an additional fee. If external parasites are noted on your pet, treatment will be applied.

What do you use for flea control?\_ When was it last applied?\_\_\_\_\_ \*Flea collars are a safety hazard while boarding and cannot be worn in the hospital.

#### 4. Abandonment

If the pet is not picked up within 7 days from the discharge date (), it will be considered abandoned and will be handled according to the California Abandoned Animal Act.

#### 5. Personal Items

You are welcome to leave personal items for your pet (toy, scent item, etc.) We will try to keep track of these items, however, we cannot guarantee their return. It is your responsibility to request the return of personal items at time of pickup. Items found after your departure will be held in the lost and found for 48 hours. Bedding is allowed however we cannot guarantee it will be returned clean or undamaged.

#### 6. Guarantee

We make every effort to provide a safe, secure and healthy environment for your pet. We cannot, however, make a guarantee that your pet will not be exposed to contagious disease, or that your pet cannot escape or injure him/herself. San Bruno Pet Hospital agrees to provide the best environment and care we are able to give. We want your pet to love us, like your pet loves you!

I have read and agree to the terms above:



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# **Boarding Agreement Cont.**

Emergency Contact Information	
Name:	Phone:
Relationship:	
	Phone:
Relationship:	
<b>Medications</b> (include last date given and dosage):	
	rovide all Medications from home in their original containers
Boarding History Has your pet experienced any of the follow	ing while boarding: (check all that apply)
□ Aggression □ Vomiting □ Diarrhea □ Stopped Eating	🗆 Weight Gain 🛛 Weight Loss
Other:	
Additional Services Additional charges will apply for service	es (inquire for pricing)
Three Daily Walks (One morning and one evening walk are already included in the daily boarding fee)	Pre-dental screening and pre-anesthetic lab work for dental prophylaxis
🗆 Nail Trim	□ Three or six months supply of flea control
□ Bath or grooming: If yes, Date:	Prescription refill request:
Time for pick up:	Name of Drug:
□ Stool specimen examination for internal parasites	□ Other:
Physical examination with veterinarian	
Heartworm testing or Felv/Fiv testing	
Complete Blood Panel with/without urinalysis	