

BOARDING INFORMATION

YOUR NAME:

PET NAME:

DATE & TIME OF ADMISSION:

DATE & TIME OF DISCHARGE:

Please tell us where can you be reached?

Telephone #'s Daytime:

Evening:

Cell:

What does your pet usually eat?

Type of food:

How much?

How often?

Please list any medical conditions your pet has:

Please list all the medications your pet takes and their directions:

Are you leaving any personal items with your pet?

If yes, please describe below:

Are there any other services that we can provide to your pet during their stay with us?

I GIVE THE DOCTORS AT REDWOOD VETERINARY HOSPITAL
PERMISSION TO MEDICALLY TREAT MY PET IF THEY DEEM IT
IMPERATIVE TO DO SO. I UNDERSTAND THAT I WILL BE RESPONSIBLE
FOR ALL MEDICAL EXPENSES UPON MY RETURN.

SIGNATURE: _____

DATE: _____