



Beverly Hills Veterinary Associates, Inc.

Boarding Form

Client Name	Pet Name
Date In	Date Out
Contact Number	Emergency Contact

Please include any and all information about your pet of which we should be aware.

Special diet and instructions:
Medications and instructions:
Medical conditions and/or problems:
Pet's belongings: Collar: _____ Carrier: _____ Food: _____ Other: _____

FOR BOARDING PETS, WE REQUIRE THAT ALL VACCINATIONS, ANNUAL HEALTH EXAMS, FECAL & HEARTWORM TESTS BE CURRENT.

DESIRED TREATMENT WHILE BOARDING	
<input type="checkbox"/> Vaccinations (MUST BE CURRENT)	
Dog: <input type="checkbox"/> DHPP	<input type="checkbox"/> RV
<input type="checkbox"/> Bord	<input type="checkbox"/> Lepto
Cat: <input type="checkbox"/> FVRCP	<input type="checkbox"/> RV
<input type="checkbox"/> FELV	
<input type="checkbox"/> Fecal (Deworming if necessary)	<input type="checkbox"/> Physical Exam
<input type="checkbox"/> Heartworm Test	<input type="checkbox"/> Annual Health Screen
<input type="checkbox"/> FELV/FIV Test	<input type="checkbox"/> Urinalysis
<input type="checkbox"/> Teeth Cleaning	<input type="checkbox"/> Blood Pressure Check
<input type="checkbox"/> Spay or Neuter	<input type="checkbox"/> Microchip
<input type="checkbox"/> Bath on Day of Release	<input type="checkbox"/> Ears Plucked or Cleaned
<input type="checkbox"/> Nail Trim	<input type="checkbox"/> Anal Gland Express
<input type="checkbox"/> Geriatric Exam	
<input type="checkbox"/> Other: _____	
<input type="checkbox"/> Other: _____	

MEDICAL ILLNESS POLICY

One of the advantages of boarding your pet at a veterinary hospital is that veterinary attention is readily available should the need arise. Your pet's well-being is our utmost concern. We will do everything possible to ensure that your pet is well cared for, properly fed & watered, and kept in a clean, comfortable environment. Should your pet become ill while boarding, your pet will be given treatment as determined by the doctors at Beverly Hills Veterinary Associates, Inc. at the pet owner's expense. We will attempt to call the emergency number(s) listed above regarding your pet's condition.

All pets exhibiting external parasites or offensive odor will be bathed or treated upon admission at the pet owner's expense. An initial health exam is required upon admission for all new pets.

If no one can be reached, I authorize Beverly Hills Veterinary Associates, Inc. to perform whatever treatment the doctor(s) deem necessary until I can be contacted.

Owner/Agent Signature: _____ **Date:** _____