



## Boarding Consent Form

### General Information

Client Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Children in Household: \_\_\_\_\_  
Other Pets in Household: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
1.) Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
2.) Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### Pet(s) Information

Dog( ) Cat ( ) Name: \_\_\_\_\_ M/F Spayed/Neutered Age: \_\_\_ Breed: \_\_\_\_\_  
Dog( ) Cat ( ) Name: \_\_\_\_\_ M/F Spayed/Neutered Age: \_\_\_ Breed: \_\_\_\_\_  
Dog( ) Cat ( ) Name: \_\_\_\_\_ M/F Spayed/Neutered Age: \_\_\_ Breed: \_\_\_\_\_  
Dog( ) Cat ( ) Name: \_\_\_\_\_ M/F Spayed/Neutered Age: \_\_\_ Breed: \_\_\_\_\_  
Where did you get your *dog/cat*? \_\_\_\_\_  
\_\_\_\_\_

How old was your *dog/cat* when you got him/her? \_\_\_\_\_  
\_\_\_\_\_

### Veterinarian Information

Clinic Name: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Phone: \_\_\_\_\_

**Vaccinations need to include rabies, parvo/distemper, and bordetella (kennel cough).  
All pets must be current on all vaccinations in order to board within our facility.  
All vaccines **MUST** be up to date **2 weeks** prior to your boarding date.  
Please provide us with a copy of *all current vaccinations*.**

### Health and Well Being Information

#### **DOG SECTION**

Has your *dog(s)* ever attended a boarding facility before? YES or NO  
If so, where and when? \_\_\_\_\_  
Has your *dog(s)* ever had obedience training? YES or NO  
If so, where and when? \_\_\_\_\_

Is your *dog(s)* generally in good health? YES or NO  
Any ongoing medical issues? \_\_\_\_\_

Is your *dog(s)* currently on heartworm prevention? YES or NO  
What is the brand? \_\_\_\_\_

Is your *dog(s)* currently on a flea and tick prevention program? YES or NO  
What is the brand? \_\_\_\_\_

Please list any other medications/vitamins/supplements that your *dog(s)* is currently taking: \_\_\_\_\_

Does your *dog(s)* have any food or medication allergies that you are aware of? \_\_\_\_\_

Does your *dog(s)* have any chronic or pre-existing illnesses or injuries? \_\_\_\_\_

Has your *dog(s)* ever experienced or been treated for 'hot spots'? YES or NO

Does your *dog(s)* have any special needs or requirements for receiving a bath such as allergies, skin rashes, fungal infections of the skin, dry skin, etc.? \_\_\_\_\_

What was the date of your *dog(s)* last vet check-up? \_\_\_\_\_

Has your *dog(s)* ever shown aggression towards people or animals? YES or NO

Does your *dog(s)* have a history of escaping/jumping fencing? YES or NO

Does your *dog(s)* have a history of digging? YES or NO

Does your *dog(s)* ever shred/tear up blankets, towels, or beds? YES or NO

Are your *dogs(s)* housebroken? YES or NO

*(If more than one more is, being kenneled please make the staff aware of which dog has the history, to insure the safety & best service to you & your pets)*

**CAT SECTION**

Is your *cat(s)* generally in good health? YES or NO  
Any ongoing medical issues? \_\_\_\_\_

Is your *cat(s)* currently on heartworm prevention? YES or NO  
What kind? \_\_\_\_\_

Is your *cat(s)* currently on a flea and tick prevention program? YES or NO  
What kind? \_\_\_\_\_

Please list any other medications/vitamins/supplements that your *cat(s)* is currently taking \_\_\_\_\_

Does your *cat(s)* have any food or medication allergies that you are aware of? \_\_\_\_\_

Does your *cat(s)* have any chronic or pre-existing illnesses or injuries? \_\_\_\_\_

Has your *cat(s)* ever experienced or been treated for 'hot spots'? YES or NO

Does your *cat(s)* have any special needs or requirements for receiving a bath such as allergies, skin rashes, fungal infections of the skin, dry skin, etc.? \_\_\_\_\_

What was the date of your *cat(s)* last vet check-up? \_\_\_\_\_

### Diet Information (Dog/Cat)

Pet Food Brand: \_\_\_\_\_

Amount fed at each feeding: \_\_\_\_\_

Number of times fed per day: \_\_\_\_\_ Once Daily \_\_\_\_\_ Twice Daily \_\_\_\_\_ Three Times  
\_\_\_\_\_ Grazer (tends to nibble throughout the day)

Does your *pet(s)* tend to drink a lot of water? YES or NO or UNSURE

Do you ever feed your *pet(s)* roughage, vegetables, or human food? \_\_\_\_\_

Do you allow your *pet(s)* to eat bones? YES or NO

### Weight and Conditioning Assessment (Dog/Cat)

How much activity does your *pet(s)* get on a daily basis? \_\_\_\_\_

What kind of activities does your *pet(s)* enjoy at home? \_\_\_\_\_

Current Weight: \_\_\_\_\_ (rough estimate is okay!)

**We do ask that you provide the current diet your pet is on. We will gladly feed in our facility. We do have an inhouse diet, you will be charged \$3.00 a day per pet if we have to feed our food. Bedding, toys, treats, and/or medication please provide those as well to insure the best care for your pet(s) during their stay with us. We do have a refrigerator so we can store food/medication properly for your pet(s). Please label items according to your pet(s).**

**If you would like to have your dog bathed prior to pick up please schedule when making reservations for boarding as the bathing schedule has limited availability.**

**Our hours of operations for our boarding facility:**

#### **Drop off**

**Monday- Friday: 9am- 11:30am or 2pm- 5pm**

**Saturday: 9am-11:30am or 2pm-4:30pm**

**Sunday: *NO DROP OFFS***

#### **Pick up**

**Monday - Friday: 9am - 11:30am or 2pm- 5pm**

**Saturday: 9am-11:30am or 2pm-4:30pm (*Payment is required for Saturday afternoon pickup*)**

**Sunday: 5:00pm- 6:00pm ONLY (*Payment is required for Sunday pick ups*)**

***We accept Cash, Visa, MasterCard, Discover, and American Express or Check for payment. Payment is due time of pick up and/or time of drop off depending when your pick up date is.***

**Testament**

***Please initial/sign as read and understanding our policies***

\_\_\_\_\_ I agree to pay for any destructive damage that my pet(s) may cause as well as any vet bills incurred for treatment of my pet for any injury or illness that may occur while my pet is boarding.

\_\_\_\_\_ I understand that attempts to contact me will be made in the event of an emergency; however, if I am unable to be reached, Eastern Pet Company has my permission to seek immediate care for my pet. They may also use the veterinarian of their choice if they deem the situation is critical or life threatening.

\_\_\_\_\_ I certify that my pet is not known to show aggression and has not shown aggression towards people or other animals or attacked either. If aggression has been witnessed previously I have already disclosed this information prior to boarding my pet with Eastern Pet Company.

\_\_\_\_\_ I certify that my pet is in general good health without medical needs/concerns; however, if my pet does have medical needs/concerns I have already disclosed this information prior to boarding my pet with Eastern Pet Company.

\_\_\_\_\_ I hereby agree to the terms set forth by Eastern Pet Company and agree to hold them harmless for any injury or illness that may occur while boarding.

\_\_\_\_\_ I hereby attest that all of the information I have given is accurate and truthful to the best of my knowledge.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**AdditionalComments/Notes** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Thank you for helping us serve you & your pet(s) better!***