Boarding Sign – In

Pet's Name	Client's Name		
Check-In Date Pick up Date			
**Note: Charge is PER DAY, not per 24 hours. **			
I have left the following items with my pet (be specific)			
1 4			
2 5			
3 6			
Has your pet traveled out of Minnesota in the previous month? YES M If yes what states have they been to?			
All medications must be in their originally dispensed containers. The follow charges apply for administering medications: Injections are \$14/day; Oral & Medications are \$3.50/day.			
Medication Log:			
Medication: Dosage: Frequency:			
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Have there been any unusual symptoms or signs that we should be aware of while boardi pet(s)?	ng your		
Feeding Instructions: Your own food? Our food (Purina EN)?			
Measurement of food given at home? Times fed per day?			
OK to have blanket in kennel? Yes, No Treats OK?, Rawhides?			
If your dog is here for more than 5 days we will be happy to give a complimentary bath & cats will receive a complimentary nail. Please note that these baths are not done by our goes that get matted easily may require professional grooming for an additional fee. Complimentary Bath: Yes, No Nail Trim: Yes, No			
Available for pets here less than 5 days: Boarding Bath @ \$11, Nail Trim @ \$20)		
If available, I would like a professional grooming (grooming charges apply) Yes No			
I understand that if my pet is found to have fleas or other external parasites, it will be me accordingly and I will be responsible for the cost of such services.	dicated		
In case of illness or injury I, the undersigned, do hereby give my consent for the doctors a Valley Animal Clinic to treat, prescribe for, or operate upon my pet(s) while they are bein at Northern Valley Animal Clinic.			
Special Instructions:			

Who will be picking up your pet(s)? Owner	Other
Emergency Contact Phone	