

# Avenida Animal Hospital

## FREQUENT BOARDING AGREEMENT

### Client Information:

Name: \_\_\_\_\_  
(Last) (First)

Phone No(s): \_\_\_\_\_  
(Cell) (Emergency)

Emergency Contact & Phone No(s): \_\_\_\_\_  
(Name: Last, First) (Phone No)

### Pet Information:

1.  Cat  Dog  Other

Name & Brief Description: \_\_\_\_\_

2.  Cat  Dog  Other

Name & Brief Description: \_\_\_\_\_

3.  Cat  Dog  Other

Name & Brief Description: \_\_\_\_\_

### Feeding Instructions:

1.  Dry \_\_\_\_\_ No of Cup(s) \_\_\_\_\_ Times Daily -or- Free Feed

Wet \_\_\_\_\_ No of Can(s) \_\_\_\_\_ Times Daily

Other Specifications: \_\_\_\_\_

2.  Dry \_\_\_\_\_ No of Cup(s) \_\_\_\_\_ Times Daily -or- Free Feed

Wet \_\_\_\_\_ No of Can(s) \_\_\_\_\_ Times Daily

Other Specifications: \_\_\_\_\_

3.  Dry \_\_\_\_\_ No of Cup(s) \_\_\_\_\_ Times Daily -or- Free Feed

Wet \_\_\_\_\_ No of Can(s) \_\_\_\_\_ Times Daily

Other Specifications: \_\_\_\_\_

### Medications:

1. Name Of Drug: \_\_\_\_\_ Dose: \_\_\_\_\_ Frequency: \_\_\_\_\_

2. Name Of Drug: \_\_\_\_\_ Dose: \_\_\_\_\_ Frequency: \_\_\_\_\_

3. Name Of Drug: \_\_\_\_\_ Dose: \_\_\_\_\_ Frequency: \_\_\_\_\_

To insure protection of ALL pets entrusted to our care, the following vaccinations MUST be currently up to date:

#### Dogs

Distemper/ Parvo Combo  
Bordetella  
Corona  
Rabies

#### Cats

FVRCP  
FeLV  
Rabies



We understand that you are a frequent boarder with us and know the routine of things by now. However, in order to ensure that you are continually happy with our services, we would appreciate it if you please took a moment to review the Agreement that you have with us.

Please *verify* Boarding Dates by Initialing! *Thank You!*

Boarding Dates: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ thru \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Initial \_\_\_\_\_

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