

## **Boarding Care Form**

Client Name:		Date/Time In:		Date/Time Out:
Cat(s) Name(s):				
				n GI. Please provide your own al diet or food preference.
Feeding Guidelines:				
Cat 1:		Cat 2:		Cat 3:
<ul> <li>Own Food (In lidded container)</li> <li>Royal Canin</li> </ul>		<ul><li>Own Food (In lidded container)</li><li>Royal Canin</li></ul>		<ul> <li>Own Food (In lidded container)</li> <li>Royal Canin</li> </ul>
Amount:		Amount:		Amount:
Frequency:		requency:		Frequency:
Has your cat eaten yet today? • Yes • No <u>Medication Guidelines</u> : All medications/supplements must be in original packaging! Medication(s)/Supplement administration is <u>\$13.00/day</u> Insulin administration is <u>\$16.00/day</u>				
Cat's Name	Medication Name/ Strength/Dose	Last time given	Instructions	
Are there any special instructions we need to know about?				
Personal Belongings:				
□ Bowl(s) □Blanket(s) □ Bed(s) □ Carriers □ Clothing □ Toys □ Treats				
□ Other:				
Emergency Contact Information- Name:Phone:Phone:				
1 of	2	Stephanie Buc	hholtz DVM	-over-



Cat<sup>®</sup>Doctor

## **Boarding Consent Form**

## Medical Illness Policy:

One of the advantages of boarding your cat(s) at a veterinary hospital is that veterinary attention is readily available should the need arise. If your cat(s) become(s) ill, we will call the emergency number listed on the Boarding Care Form regarding your cat's symptoms, treatment options, and estimate of additional costs. If no one can be reached, however, we will administer the minimum level of medically necessary care to your cat(s) to relieve immediate discomfort or to resolve an important medical condition until we are able to get in contact with you, or your emergency contact.

## **Boarding and Medication Administration Fees:**

Your cat's boarding rate is  $\frac{35.00}{day}$ . If your cat is picked up prior to noon on the day of pick up, there is no charge for that day. For cats requiring medication(s)/supplements there is a fee of  $\frac{13.00}{day}$ . For cats requiring insulin injections there is a fee of  $\frac{16.00}{day}$ . For subcutaneous fluid administration, there is a 30.00/administration fee.

**Medication Policies:** All medications and supplements must be in their **original packaging**. We can not administer or accept any medications or supplements that are not in their original packaging. No off-label, or non-prescription products will be given without explicit owner approval.

I fully intend to pick up my cat(s) on the date and time specified on the Boarding Care Form. If circumstances change, I will notify the veterinary clinic of a new pick up date and time. I understand that I am responsible for these charges and that **payment is due**, in full, upon discharge of my cat(s).

In the unlikely event that my cat should pass away while boarding, The Cat Doctor will retain their body until such time as I return or other arrangements can be made.

Client Signature: \_\_\_\_

Date: \_\_\_\_

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