



Flagler Animal Hospital

PROVIDING A LIFETIME OF CARE

130 Old Kings Road S. Flagler Beach, Florida 32136

386.439.1606 Fax 386.439.1605

BOARDING CONTRACT

Name: _____ Today's Date: _____

Pet's name: _____ Species: _____ Age: _____ Sex: _____

Pet's name: _____ Species: _____ Age: _____ Sex: _____

Phone: _____ Other Phone: _____

Address/City/State: _____

Veterinarian: _____

Boarding Dates: **Drop off:** _____ **Pick up:** _____

Time you will pick up your pet: _____ (if your pet is getting a bath, pick up time is after 1pm)

EMERGENCY NAME & NUMBER (In the event of an emergency, let us know who we should contact)

This is a **CONTRACT** between Flagler Animal Hospital, Inc. (hereafter called "FAH") and the pet owner whose signature appears on the following page below (hereafter called "Owner").

To agree to the terms of this contract you must initial items 1-15 below. This contract will NOT be processed until you have initialized all 15 items below.

_____ 1. By signing this Contract and leaving his/her pet with FAH, Owner certifies to the accuracy of all information given about said pet on the Contract.

_____ 2. I understand and agree that in admitting my pet(s) to FAH and their staff, I have to the best of my knowledge explained any issues concerning my pet's health.

_____ My pet is currently in good health

OR

_____ My pet currently has the following health condition: _____

_____ 3. I understand and agree that FAH staff and doctors will not be liable for any problems which develop, provided reasonable care and precautions are followed, and I hereby release them of any liability of any kind whatsoever arising from my pet(s) boarding at the hospital.

_____ 4. I understand and agree that any problems that develop with my pet(s) that require medical attention during their stay will be treated as deemed best by staff and doctors of FAH, at their sole discretion. I am aware that I will be charged for these services/procedures.

_____ 5. Daily boarding charges begin on the date entered on this contract. Client agrees to notify FAH in advance if there is any change in the date boarding pet is to be picked up. No boarding pet shall be released until all charges are paid in full.

- _____ 6. Boarding charges are calculated by the night. If your pet is not picked up **by 12 noon the day of departure, you will be charged an additional half day of boarding.**
- _____ 7. Dogs must be up to date on the following vaccinations: Distemper (DHLPP or DHPP), canine influenza, bordetella, rabies and have a negative fecal within 6 months. Cats must be up to date on FVRCP and rabies. Dogs must be vaccinated for Canine Influenza 6 weeks prior to boarding.
- _____ 8. Pets with fleas/ticks will be bathed and a topical flea/tick product applied at owner's expense.
- _____ 9. We will take care when handling your pet's personal belongings. The hospital is not held responsible for the loss of any toys, leashes, collars, or bedding that is brought into the hospital.
- _____ 10. Baths are provided free for dogs when your pet boards with us for 5 days or longer or as needed.
 _____ I decline a bath for my pet or _____ I would like my pet bathed
- _____ 11. I understand that FAH will provide Science Diet Sensitive Stomach mixed with W/D at no additional charge. Prescription diets will be provided at an additional cost.
 Select one:
 _____ I have provided food for my pet
 _____ I would like FAH to provide food.
 _____ I will purchase a Prescription Diet food from FAH (brand name) _____
- _____ 12. I understand that there is an additional charge if my pet requires medication, brushing, special or additional care, which may include involved feeding instructions.
- _____ 13. My pet will need the following procedures during their stay at your hospital: ("n/a" if none needed)

-
-
- _____ 14. In the event that there is a named storm/hurricane or other emergency that requires evacuation while your pet is boarding with us, it is your responsibility to have a designated person pick up your pet. If this person cannot be contacted by our staff and we are forced to evacuate, we will take your pet with us to our chosen destination.
- _____ 15. This Contract contains the entire agreement between the parties. All terms and conditions of this Contract shall be binding on the heirs, administrators, personal representatives and assigns of the Owner and FAH.

I have read the Contract in its entirety, understand and agree to its terms and conditions.

Owner's Signature _____ **Date:** _____

Witnessed by FAH Representative _____ **Date:** _____

HOW DID YOU BECOME AWARE OF OUR FACILITY?

_____ *YELLOW PAGES* _____ *FAH SIGN* _____ *ADVERTISEMENT* _____ *INTERNET WEB SITE*

_____ *PERSONAL RECOMMENDATION - WHOM MAY WE THANK?* _____