

Client:  
Date:  
Phone:

Patient:

Sex:  
Species:  
Breed:

Arrival Date:

Departure Date:

Initial \_\_\_\_\_ (This contract is good for 1yr unless **anything** changes between stays- I understand it is my responsibility to advise St Francis of ANY changes between stays)

**Suite Type:** (ok to share a suite with: \_\_\_\_\_)  
{CAGETYPE} (**Pets must be able to eat together to board together. No exceptions!**) Initial \_\_\_\_\_

**Pet Personality:(please read carefully!!!)**

- \_\_\_\_\_ My pet has **NEVER** exhibited any form of aggression toward people or other pets
- \_\_\_\_\_ My pet **is Protective** of his/her area, food and/or possessions (**not eligible for group play**)
- \_\_\_\_\_ My pet **HAS nipped** at other pets/humans (playfully OR aggressively) (**not eligible for group play**)
- \_\_\_\_\_ My pet **HAS bitten** other pets/humans (**not eligible for group or individual play**)

Initial \_\_\_\_\_

**Activities and Play:** (initial each choice you wish your pet to participate in)

(only fixed and non-aggressive breeds) \$12/Day <b>Group</b> Everyday 4hrs _____	(only fixed non-aggressive breeds) \$14/Day <b>Group</b> Every Other Day 4hrs _____
\$16/Day <b>Individual</b> Everyday 40min _____	\$18/Day <b>Individual</b> Every Other Day 40min _____
\$10 Play Swim/Session( <b>Daily/ EOD</b> ) _____	\$5/Goodnight Story/Cuddle time ( <b>Daily/EOD</b> ) _____
\$7/Ses 1-20min Indiv.( <b>Daily/EOD</b> )20min _____	

Groom: (Price varies by breed/coat/behavior)  
 No Groom Scheduled-Check-Out time is 12noon otherwise you will be charged an extra night. Initial: \_\_\_\_\_

Go Home Fresh Bath/Brush - We will call you when your pet is ready for Pick up. Initial: \_\_\_\_\_

**Extras:** Anal glands \$29(tech)\_\_\_\_ Nail Grind \$8 \_\_\_\_ Medicated Shampoo \$10 \_\_\_\_ Teeth Brushing\$8 \_\_\_\_  
 Furminater \$15 or more depending on the amount of brushing required: \_\_\_\_\_

**Feeding:** Initial \_\_\_\_\_

	AM <input type="checkbox"/>	Noon <input type="checkbox"/>	PM <input type="checkbox"/>	
	AM <input type="checkbox"/>	Noon <input type="checkbox"/>	PM <input type="checkbox"/>	
	AM <input type="checkbox"/>	Noon <input type="checkbox"/>	PM <input type="checkbox"/>	
	AM <input type="checkbox"/>	Noon <input type="checkbox"/>	PM <input type="checkbox"/>	

**Medications:** Initial \_\_\_\_\_

	AM <input type="checkbox"/>	Noon <input type="checkbox"/>	PM <input type="checkbox"/>	
	AM <input type="checkbox"/>	Noon <input type="checkbox"/>	PM <input type="checkbox"/>	
	AM <input type="checkbox"/>	Noon <input type="checkbox"/>	PM <input type="checkbox"/>	
	AM <input type="checkbox"/>	Noon <input type="checkbox"/>	PM <input type="checkbox"/>	
	AM <input type="checkbox"/>	Noon <input type="checkbox"/>	PM <input type="checkbox"/>	

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Yes\_\_\_ No\_\_\_ Has your pet boarded, been adopted (for pet store or shelter) or otherwise housed with other pets (other than your own home) in the last month?  
Yes\_\_\_ No\_\_\_ Does your pet have any medical conditions or had any medical treatment(s) in the last 6 months?  
If YES to any of the above please EXPLAIN:

**HPP:** Initial\_\_\_\_\_ I understand the below statement and have seen the HPP coverage policy. (\$7/week per pet-for duration of the boarding stay)

**Owner's pet is automatically enrolled in the Healthy Pet Program** (HPP) which covers up to \$500 of boarding-related veterinary expenses(excluding pre-existing conditions or airborne virus-does not cover injuries that occur during group play).

**Media Consent** – I grant St. Francis Animal Hospital and its representatives/employees the right to take photographs of me and/or my pet, and to copyright, use and publish the same in print and/or electronically.  
*Please Initial:* Yes, I consent: \_\_\_\_\_ No, I do not consent: \_\_\_\_\_

**IN CASE OF EMERGENCY:** If owner's pet requires medical attention during boarding or grooming, owner authorizes one of the following (**Every attempt will be made to contact owner**):  
\_\_\_\_\_ Do **ALL** that Lakefield Veterinary Group deems necessary to try and maintain the pets health. Owner verifies that he/she is responsible for all costs relating to that care **OR**  
\_\_\_\_\_ Do **NOT** take extensive measures costing in excess of \$\_\_\_\_\_. Minimum requirement is **\$250** to cover initial emergency care. Owner releases Lakefield Veterinary Group from any liability resulting from any inability to exceed the specified amount of medical treatment.

Emergency Contact: \_\_\_\_\_ Phone # \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone # \_\_\_\_\_

By signing this agreement, I acknowledge that I am the legal owner of the pet(s) being boarded or an authorized agent of legal owner. I am not aware of any reason why my pet(s) should not be boarded at this time. I have read and agree to the individual care information above and to the **Terms and Conditions on page 3.**

***Flea check: Upon arrival, your pet will be given a brief visual exam. If fleas/flea dirt are found to be present, it will be necessary to administer a Capstar (oral tablet) at an additional cost of \$7.50+ tax or given a flea bath (quote will be provided).***

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

Email for daily photos: {EMAILADDRESS}

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Breed:

**Terms of Agreement:**

Owner agrees that Lakefield Veterinary Group will **NOT** be responsible or liable for any injuries, harm, damages, losses of any type whatsoever caused by airborne virus, including but not limited to canine influenza virus and tracheobronchitis ("canine cough"). Lakefield Veterinary Group has taken reasonable steps to minimize the occurrence of airborne illnesses. **However, no amount of supervision, sanitation or personalized care can prevent a pet from contracting an airborne virus.**

**Owner understands that any boarding experience can be stressful for some pets** and that such stress can cause suppression of the immune system and can exacerbate any underlying physiological problems of the pets relating to age or breed. As a result, said pets could manifest problems relating to known or unknown pre-existing or current health issues.

**Owner is responsible for any damage their pet inflicts upon people, property, or other pets** (inclusive of any pets boarding together at owners request).

**Owner understands that Lakefield Veterinary Group cannot be responsible for any items lost or destroyed.**

Owner understands that **pet abandonment may be a criminal or civil violation** of the statutes of his/her state, and agrees to pay any and all costs in the prosecution of these statutes.

Initials \_\_\_\_\_

**Group Play:**

Owner Certifies to be eligible for GROUP PLAY, that his/her dog:

- Is at least five (5) months of age and is spayed or neutered. Initial \_\_\_\_\_
- Is in good health and has not been ill with any communicable condition (which could potentially jeopardize other guests) in the last 30 days. Initial \_\_\_\_\_
- Has not harmed or shown any aggressive or threatening behavior towards any person or any other dog(s). Owner understands that his/her pet will be spending time with other pets

and that their safety and health is our main concern. Initial \_\_\_\_\_

**Our Staff has the sole discretion to remove owner's pet from GROUP PLAY for reasons including, but not limited to, any signs of potential communicable diseases and/or aggressive behaviors.**

Group Play is an activity held in a group environment with close pet-to-pet interaction. Injuries may occur as a result. Our **Healthy Pet Plan** does **NOT** cover any of these injuries.

Owner agrees that Lakefield Veterinary Group will **not** in any way be responsible or liable for any injuries, harm, damages, losses of any type whatsoever sustained or inflicted by owner's pet or any of owners property. **Owner also expressly authorizes Lakefield Veterinary Group to release his/her personal information and that of his/her pet or other property, at the discretion of Lakefield Veterinary Group, to anyone requiring the information as a result of damage or injury inflicted by said owner's pet.**

Owner expressly waives his/her right to pursue any claims of any type against Lakefield Veterinary Group and expressly releases Lakefield Veterinary Group, its officers, agents, and employees from any and all responsibility and liability of any type it may have for all injuries, harm, losses or damages that owner, owner's pet or owner's property may sustain or inflict while at Lakefield Veterinary Group, and will be solely responsible for all payments of any type, including costs, legal fees or payments of any type Lakefield Veterinary Group might incur due to such injuries, harm or losses.

Initials \_\_\_\_\_