



# BOARDING POLICY/CONSENT

**Our Vaccination Policy:** To insure the protection of all pets under our care and minimize potential spread of contagious diseases, the following vaccinations/treatments must be current:

**Dogs: Annual Exam**  
DA2PP (Distemper/Parvovirus)  
Rabies  
Bordetella  
Fecal parasite exam  
Influenza

**Cats: Annual Exam**  
FVRCP (Feline Distemper)  
Rabies

All pets must be up to date on all required vaccines at admission; you must provide documentation of current vaccination before or at the time of admission. Lone Star Animal Hospital will vaccinate any pet that does not have the required vaccinations (or proof thereof) at the owner's expense.

**For the security of your pet and safety of our employees, we will ONLY admit and/or release your pet during office hours. CHECK-OUT IS BY 12:00 PM. Pets picked up after 1:00pm will be charged an additional day (with the exception of bathed animals).**

**Parasite Control:** In order to maintain cleanliness and parasite control in our hospital, all pets must be free of internal and external parasites (ie ticks, fleas). The hospital reserves the right to treat a pet as reasonably necessary for parasites and the charges will be reflected on the invoice at the time of release. Bathing may be necessary for some pets and will be charged for accordingly.

**Diet:** We feed Purina EN dry kibble to dogs and ProPlan Total Care Salmon dry kibble to cats while boarding. We will be happy to feed your pet's own special food that you bring, along with any special instructions.

**Medications:** We will be happy to administer any medications to your pet while boarding. Please provide original prescription with clearly labeled instructions.

**Personal Belongings:** Bedding is provided for each pet, but will be removed if pet is destructive. Please bring only one toy per pet. We cannot be held responsible for loss or destruction of belongings.

**Off Leash in Fenced Yard:** \_\_\_\_\_ I authorize Lone Star Animal Hospital to allow my dog off leash in the 6 foot fenced exercise yard. I understand this will be done with an employee's supervision at all times, but assume all risk and responsibility for my pet.

**Co-Pet Play Time:** \_\_\_\_\_ I authorize Lone Star Animal Hospital to allow my dog off leash play time with others dogs (of same size) once compatibility has been established. My dog has NOT shown any aggressive tendencies toward other animals.

**Treatment Authorization:** One of the advantages of boarding your pet at a veterinary hospital is that veterinary attention is readily available should the need arise. If your pet becomes ill, we will call the emergency number(s) listed. If no one can be reached however, please indicate your wishes below should your pet require treatment to relieve immediate discomfort or to resolve an important medical condition:

\_\_\_\_\_ Perform whatever services the doctor deems necessary for the best care of my pet until someone can be reached.

OR

\_\_\_\_\_ DO NOT administer any medical treatments, including life-saving measures.

## EMERGENCY CONTACT INFORMATION:

Your Name: \_\_\_\_\_ Phone# \_\_\_\_\_

Alternate: \_\_\_\_\_ Phone# \_\_\_\_\_

Alternate: \_\_\_\_\_ Phone# \_\_\_\_\_

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