



Greens Fork Animal Hospital, P.C.
8089 State Road 38
Greens Fork, IN 47345

Boarding Check-In

Client Name: _____

Patient Name: _____

Address: _____

Species: _____

Breed: _____

Sex: _____

Phone Number: _____

Color: _____

Weight: _____

Birth Date: _____

Date in: _____ **Dateout:** _____ AM PM

Feline Boarding: \$15.00/day

Canine Boarding: 0-25# - \$15.00/day 26-50# - \$17.00/day 51-100# - \$19.00/day 100#+ - \$21.00/day

Required Items to Board-

All Boarders MUST Be Up To Date On:

Rabies Vaccine (K9 & Feline) _____

DAPPV (K9) _____

Bordetella (K9) _____

Influenza (K9) _____

FVRCP (Feline) _____

Flea Prevention (K9 & Feline) _____

VACCINATION	DATE DUE
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Your pet must be current on a veterinary approved flea prevention withing the last 30 days. Please list the type of prevention and the date it was last applied: _____

Is your pet on any medications? If so, please list them along with dosing instructions. There is an additional charge of \$0.50 per dose of medication given. _____

Anxiety? If your pet has anxiety during boarding, do we have permission to start medications to help keep them calm?
 Yes No

Diet Instructions: We feed Science Diet Maintenance dry and I/D canned and dry foods for both canines and felines. If you provided your own food, please list the brand and feeding instructions. _____
(Should your pet not eat what is listed, we will dispense various foods for an additional price.)

Should your pet develop diarrhea due to diet change or anxiety, do we have permission to start your pet on medications (Fortiflora, Metronidazole, etc) to help treat your pet? Yes or No

Belongings: Please list any personal belongings you brought for your pet. _____

Emergency Contact Information: Person(s) to contact in case of emergency who will be able to authorize treatment.

Name: _____ Phone: _____

Name: _____ Phone: _____

Who will be picking up your pet? (If not the owner) ____

Additional Amenities (circle any that you would like to add)

Bath (includes complimentary nail trim and expressed anal glands):

Feline Bath: Longhair - \$35.03 Shorthair - \$28.85

Canine Bath: 0-25# - \$30.91 26-50# - \$36.06 51-100# - \$41.20 100#+ - \$46.36

(NOTE: for sizes 0-25 S, 26-50 M, & 51-100 L there will be an additional charge of \$5.00 for a long haired coat, for 100+ XL there is an additional \$10.00 charge for a long haired coat)

Playtimes: \$7.99/15 min (2 or more pets can combine for 1 charge) # of Playtimes: ___ per day
 on what day(s)?

Exam: \$50.00

Complete Medical History Pertaining to Exam:

Heartworm Test: \$34.00 (plus \$4 HAZ charge)

Nail Trim: \$15.50

Express Anal Glands: \$15.46

Fecal Check: \$19.06

Signature of Owner: _____

Date: 3/29/21