

**Stonyridge Veterinary Service**

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**Boarding Form**

**Owners Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Return Date:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Alternate Contact Person:** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

**Animals Name:** \_\_\_\_\_ **Dog** \_\_\_ **Cat** \_\_\_ **Other** \_\_\_\_\_ **Wt** \_\_\_\_\_

**Articles Left:** \_\_\_\_\_

**Disabilities:** \_\_\_\_\_

**Sensitivities:** \_\_\_\_\_

Is your pet on a special diet? Yes / No

If so, what is the brand? \_\_\_\_\_

It is **STONYRIDGE VETERINARY SERVICE'S** suggestion that all animals boarding here at the clinic be current on all their vaccinations. If your animal is not current we would be happy to give the vaccinations to your pet during their stay.

Is your pet current on their vaccinations? Yes / No. If no, do you wish to have vaccinations during your pets stay with us?

Bordetella (Kennel Cough) vaccination? Yes / No. If no, do you wish to have the Bordetella vaccine while you pet is staying with us?

Does your pet require any special medical treatment? \_\_\_\_\_

If your pet becomes ill while visiting **STONYRIDGE VETERINARY SERVICE** do we have permission to treat your pet? Yes / No

If you cannot be reached what is the maximum amount you wish to spend? \$\_\_\_\_\_

**Signature:** \_\_\_\_\_

**Pick – Up or Drop Off Times: Monday – Friday 8am – 9pm  
Saturday- 8am - 1pm or 7pm  
Sunday - 9am - 1pm or 7pm**

**Have a Nice Trip!**