



<animal>:</animal>		<client> :</client>						
Name		Name						
Arrival Date: <check-in></check-in>			Departure Date: <check-out></check-out>					
What phone numbe	r(s) can we read	ch you at while y	ou are awa	ay?				
VACCINATIONS	Do vaccinations	need to be upda	ated?					
O Current O Vaco	cinations due:	Bordetella	DACPP	_ DACPP+L	Rabies	FVRCP+	FeLeuk	
MEDICAL SERVIC	ES REQUESTI	ED AT ADDITIO	ONAL CH	ARGE:				
O Physical Exam (\$35.) O Fecal Exam (\$13.)								
O Heartwor	O Heartworm Test (\$29.) O Ear Cleaning/Treatment (\$14. and up)							
FLEAS: If evidence	of fleas is pres	ent, Capstar tre	atment MI	JST be admin	stered. The	re is a \$7.25	fee for this.	
Please list any medi	cal conditions y	our pet may hav	e:					
List any medications	to be given wh	ile boarding (the	ere is a min	imum charge	of \$2.50 for	medication	given) :	
		from homo?						
		from home? F						
O No. If no, Ardm	ore Animal Hos	pital staff will pr	ovide <i>Hill's</i>	Science Diet:	Sensitīve Sto	mach & Skii	n.	
ADDITIONAL SER	VICES REQUI	ESTED AT ADD	ITIONAL	CHARGE				
Bath before he/she	goes home (\$15	5-\$22.50, based o	on weight)			yes 🔾	no O	
					et must be p			
Playtime	(\$8 per romp)	Time	s/Day		yes O	no O	
Comfort Cushion	(\$5 per stay)					yes O	no O	
Daily Pet Treats	(\$2 each)		Times,	/Day		yes 🔾	no O	
Please describe all b	elongings left w	vith your pet, inc	luding foo	d and treats:				

NOTE: The clinic is not responsible for loss or damage to personal items left with the pet including but not limited to leashes, collars, toys, and bedding.