



Boarding



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Owner's Name: _____ Pet's Name: _____ Date: _____

Please take a moment to review Orchard Park Animal Hospital's boarding policy and to give us information on how best to care for your pet during its stay. This policy has been implemented to ensure the safety and well-being of your pet while boarding with us.

Requirements

- Dogs**
- Rabies
 - Distemper/Parvo
 - Bordetella (every 6 months)
 - All dogs must be free of internal parasites. A fecal exam will be performed on all dogs that are not current on heartworm preventive or do not have a current negative fecal exam. If the dog is positive for internal parasites, it will be treated while boarding at the owner's expense.

- Cats**
- Rabies
 - Upper Respiratory Vaccine

All pets All pets will be examined for external parasites. If the pet is found to have external parasites it will be treated accordingly at the owner's expense.

Bathing/Grooming: All pets will be bathed as close to their departure date and time as possible. Please be aware that any change in the listed time or date of departure provided by the owner may result in Orchard Park Animal Hospital's inability to provide this service. Guests receive 20% off the cost of a bath. Guest staying more than 10 days get a free bath. **Bathed pets can be picked up after 1pm**

Departure: Pets must be picked up before 4:30pm on departure date or an additional \$10 charge will be assessed.

Medical Illness Policy: If an unforeseen medical condition arises while boarding, Orchard Park Animal Hospital will attempt to contact the owner and advise the necessary treatment. If we are unable to contact the owner, Orchard Park Animal Hospital will treat emergency conditions accordingly at the owner's expense.

- Diet:**
- I would like OPAH to feed my pet Purina EN (hospital diet)
 - I would like my pet fed its regular diet that I have brought.

Special Needs:

- I would like my pet to have 20 minutes of extra playtime per day (9\$ per day)
- I would like my pet to stay in a run with a heated floor (7\$ more per day)
- My pet is on Medications (4\$ per day)

Bathing:

- I would like my pet bathed (20% discount, Guests staying more 10 nights or more get a free bath. Discount will not apply to Grooming)
- I do not want my pet bathed

Medical Illness:

- I would like non-emergency conditions treated up to \$_____ without contacting me
- Please do not treat any non-emergency conditions without contacting me or emergency contact first

Would you like us to post pictures of your pet on Facebook? Yes No

Departure Date: _____ Emergency Contact Number: _____

Signature _____ Date: _____

Please note that any emergency contacts listed will be responsible for making medical and financial decisions for your pet if the owner cannot be reached

Office Use Only	Employee Initials:
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