



# DWIGHT VETERINARY CLINIC

815-584-2732 305 S. Old Route 66 | Dwight, IL 60420 dwightvet.com

INTERNAL USE ONLY : Client ID \_\_\_\_\_

Scanned  Previous Records \_\_\_\_\_ Initials

## BOARDING POLICIES

We board animals as a service to our clients on a reservation basis. Each pet is assigned a kennel suitable to their size. Dogs are placed in large individual runs several times a day for exercise periods (minimum twice per day). During this time, we clean and disinfect their accommodation and line the floor with fresh bedding. All animals are fed at least once daily with a well-balanced diet or the food you have provided.

All animals must have proof of current immunizations, including Rabies, Distemper/Parvo, Bordetella and Canine Influenza. We require dogs to have both boosters of the H3N2 and H3N8 Canine Influenza with the final booster given at least two (2) weeks prior to your boarding reservation. If vaccinations are not current, they can be administered upon arrival with the *exception of the Canine Influenza* at the owner's expense. I understand that it is hospital policy that my pet is current on all vaccinations prior to being admitted and is free of external and internal parasites (fleas, ticks, worms, etc.) or these will be corrected at admissions and changed accordingly. \_\_\_\_\_ initial

Boarders will be admitted and discharged Monday, Tuesday, Wednesday and Friday between 8am-4:30pm; Saturday, 8am-11am. We are closed on Sunday and Thursday. Emergency release of pets after hours will be subject to a return to office emergency fee and the availability of the doctor on call. We must have a phone number where you or a responsible agent can be reached in the event of an emergency should arise.

**If further diagnostics are required, do you consent to?**  Sedation  Bloodwork  Radiographs  None, call first \_\_\_\_\_ initial

**In the event you cannot be reached, how would you like us to proceed in a life-threatening emergency situation?**  
 Do nothing until I am reached  Perform life-saving procedures, but nothing else until I am reached.  
 Use professional judgement and proceed accordingly. I understand I will be responsible for the cost of such treatments. \_\_\_\_\_ initial

All boarders will be given a 24-hour flea preventative on admission. Upon your request, we will give your pet(s) medications during their stay at no extra charge. Any health problem that becomes apparent with your pet while in the hospital will be treated. Reasonable fees will be charged for necessary treatment.

Please be aware that boarding (change of environment) can be stressful to any pet. Any latent disease condition may become pronounced from stress in any form. The Dwight Veterinary Clinic or any of its employees cannot be held liable for the expiration of any animal during the term of the patient boarding. A deposit is required or a credit card on file for all boarders staying longer than seven (7) days unless prior credit has been approved. All accounts must be paid in full prior to dismissal.

Boarding provides an excellent opportunity for the doctor to examine your pet. Routine procedures such as heartworm testing, vaccination boosters, intestinal parasite examinations, and dental prophylaxis may be conveniently performed to ensure your pet's continued good health. These services will be performed upon request pending schedule availability. \_\_\_\_\_ initial

I am the owner of the above named pet, or I am responsible for him/her and have the authority to execute this consent. I understand an estimate for services and anticipated charges can be created upon my request. I hereby consent to the hospitalization and authorize the staff to administer medications, tests, anesthetics or surgical procedures that the doctor deems necessary for the health, safety and well-being of the above mentioned pet. I agree to indemnify and hold Dwight Veterinary Clinic harmless from and against any and all liability arising out of the performance of any of the procedures referred to above. ALL FEES FOR PROFESSIONAL SERVICES ARE DUE AND PAYABLE AT THE TIME OF DISCHARGE. I agree, in the event that any amount becomes past due more than 30 days, I will pay a finance charge from the date the charge incurred.

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

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_