

Cobb Animal Clinic Boarding Check-In (one form for each pet)

Owner's Name: _____

Pet's Name: _____

Boarding Dates: Drop-off: _____ Pick-up: _____

Do you plan to pick-up before 9:00 a.m.? Yes No

Emergency contact: Name _____ Phone _____

Would you like your pet to receive (a):

Bath? YES NO (COMPLIMENTARY BATHS ARE PROVIDED AFTER 4 NIGHTS)

If your pet is receiving a bath, please try to pick-up in the afternoon to better ensure that your pet will be bathed and dry

Nail Trim? YES NO (Fee: \$12.50)

Playtime? YES NO *Offered Monday - Saturday* (Fee: \$7.15 per 15 minute session)

If Yes, how often?: Once daily Twice Daily Every other day Other _____

Blankets? YES NO *Blankets should not be offered if your pet has chewed them in the past!*

Our practice carries Hill's Science Diet pet foods. Our *general* boarding food provided is Hill's Science Diet Sensitive Stomach. If your pet is on another type of Science Diet, then notate this below and we will provide it. If your pet is not fed Hill's Science Diet, then you may bring your own food from home to keep your pet on the same diet.

What will your pet eat while boarding? (check one)

___ Own food ___ Our boarding food ___ Other Hill's Science Diet food: _____

How often would you like your pet fed? Twice Daily Three Times Daily

How much should your pet eat each feeding? _____ measuring cup(s) &/or _____ can

Will we need to administer any medications? YES NO (Fee: \$2.25 per administration)

Does your pet have any major medical conditions or special considerations?

Doctor Preference, if needed while boarding: (circle one)

First Available Dr. Whitley Dr. Meekins Dr. Clark Dr. Nunemacher

FOR OFFICE USE ONLY:

Aggressive YES NO _____

Special Instructions _____

Medications:

Amt/Frequency/other

Given Today?

1. _____ sid bid eod _____

Yes No

2. _____ sid bid eod _____

Yes No

3. _____ sid bid eod _____

Yes No

4. _____ sid bid eod _____

Yes No