

# Crestview Animal Hospital

## *Boarding/Drop off Policies and Rates*

Our mission is to provide your pet with a clean and comfortable environment so that you, your pet, and our staff have a stress-free boarding experience. We feel that our boarding policies will help make this possible.

**Client Name:** \_\_\_\_\_

### **Boarding Rates (Per Day):**

Dogs (40 pounds and over).....	\$23.00/day
Dogs (Less than 40 pounds).....	\$21.00/day
Cats (Any size).....	\$19.00/day
Medications While Boarding (Once Daily).....	\$3.50/day
Medications While Boarding (Twice Daily).....	\$6.00/day
Sunday Pick Up Fee.....	\$12.00

### **Do I need to bring anything for my pet?**

You are welcome to bring items from home (food, water bowls, blankets, beds, toys, etc.). Please note that we will not be held responsible for the loss or damage of any item(s) left here.

### **Boarding Policies**

1. *Pets are boarded by **days**, not **nights**.*
2. *Check-in day is **Day 1** of boarding.*
3. *Pick up time is after 10:00 am (Mon-Sat) unless otherwise approved.*
4. *You are not charged for the day you pick up if you pick up **before 1:00 pm**.*
5. *If you pick up **after 1:00 pm**, that day is charged as an additional day of boarding.*
6. *Sunday pick-up is available between 4:30 pm and 5:30 pm **with prior arrangements**.*
7. *Due to the additional staff required, a \$12.00 charge will be applied for Sunday pick-ups.*
8. *All pets must be current on vaccines to board. If proof of vaccination cannot be provided, your pet will be vaccinated and your account will be charged accordingly.*
9. *If your designated pick-up time changes, please call our office so that we may readily accommodate you upon your arrival and avoid any unnecessary inconveniences.*
10. *There is a \$3.50 charge per administration of any medication while your pet is boarding.*

***I understand my animal must be current on all vaccines and be accompanied by proof of vaccinations in order to be dropped off. Crestview Animal Hospital has my permission to administer any vaccines needed for my pet to be current. I agree to pay any charges for vaccines as set forth by Crestview Animal Hospital. I have read and fully understand the boarding and vaccine policies set by Crestview Animal Hospital and acknowledge this with my signature below:***

Emergency Contact Number(s): \_\_\_\_\_

*In the event that I am unable to be reached for an emergency, I authorize Crestview Animal Hospital to perform any treatments necessary and I agree to be responsible for payment of services.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date