

Dr. Jyl's Mobile Vet Connection Boarding/Daycare Drop-Off Information

Owner's Name

Drop-Off Date / Time

Pet's Name

Pick-Up Date / Time

Weight In:	Weight-Out:
Temp-In:	Temp-Out:

All phone numbers where you can be reached in case of an emergency (ie: Hotel):

If your pet did not receive its most recent vaccination(s) from Dr. Jyl's Mobile Vet Connection, you must present proof that he/she is up to date on vaccinations, or we will vaccinate your pet for its own protection and the following charges will apply. **The policy of Mobile Vet Connection is for all animals to be microchipped, current on all standard vaccinations (Bordetella must have been given within six months), fecal testing for Giardia, Heartworm/Lyme/Ery/Ana (4DX) test, and heartworm and flea preventative medication while boarding.**

Initial: _____

Boarding Requirements:

Canine Requirements:	Date Given:	Cost:
DHPP 3yr		\$51.00
DHPP Titer		\$90.00 + \$8.00
Rabies 3yr		\$26.50
Lepto 4way		\$34.00
Fecal with Giardia		\$48.75
HWT/ERY/AN/L YME (4DX)		\$42.50 + \$8.00
Bordetella (6 months)		\$26.50
Microchip	Microchip #:	\$41.00 + \$22.00 (OPT)

Feline Requirements:	Date Given:	Cost:
FVRCP 3yr		\$52.00
FELV 2yr		\$38.00
Rabies 3yr		\$69.50
Fecal with Giardia		\$48.75
FELV/FIV TEST		\$81.00 + \$8.00
Microchip	Microchip #:	\$41.00 + \$22 (OPT)

Boarding Pricing: K9 Small : 0-14 lbs (\$33/\$35) K9 Extra Large : 60-74 lbs (\$60/\$74) Please inquire within for other species
 K9 Medium:15-24lbs (\$35/\$37) K9 Extra Extra Large : 75+ lbs (\$75/95)
 K9 Large: 25-59lb (\$40/\$45) Cats: (\$30/\$35)

Initial: _____

Is your pet currently on a flea treatment and heartworm preventative program? Yes _____ No _____
 If yes, which products were given, and when were the last dosages administered? Flea: _____ Heartworm: _____

To ensure safety to other boarders, if your pet is not currently on a flea treatment program, a dose will be given at the owner's expense. The Mobile Vet Connection is not responsible for external parasite control and/or infestation after boarding. Our premises are kept as clean as possible.

Initial: _____

Does your pet have any health problems (i.e.: seizure history, etc.) that we should be aware of?

Will your pet require medication(s) while boarding? If so, describe briefly here, and fill out a Boarding Medication Sheet:

There is a \$1.50 charge each time we administer medications while boarding (up to 4 meds). For 5-10 meds, there is an additional \$4.00 flat rate charge each time we administer the meds.

Initial: _____

If your pet is a dog, has it been socialized with other animals? Yes _____ No _____ N/A _____

Did you bring your pet's food? Yes _____ No _____ What brand of kibble do you feed currently while boarding? _____
If so, what kind of food did you bring, and how often and what quantity should your pet be fed?

Please list all items brought with your pet so we can return them when your pet goes home (ie: leash, toys, beds, etc.):

What command(s) does your pet respond to? _____

Has he/she ever bitten another animal or person? Yes _____ No _____ If yes, please describe: _____

List any additional services that you would like us to perform: _____

I understand that the boarding day begins at 12:01 A.M. and ends at midnight. Fees accrue every day that your pet is in the clinic including the day you drop off and pick up, regardless of pick-up time. Pick-up times are weekdays from 10:00 A.M. to 5:00 P.M., and Saturdays from 10:00 A.M. to 1:00 P.M. **There are no pick-ups or drop-offs on Sundays.**

Note: A late fee of \$10.00 may be added to your bill for pick-ups and/or drop-offs 15 minutes past stated times. Pets left 30 minutes after stated times may incur a boarding fee of \$20.00, and may be required to be picked up the following morning.

Initial: _____

I have been quoted _____ per day for boarding.

I have been quoted _____ per day for administering meds in hospital.

I have been quoted _____ for the stated vaccines/treatments/heartworm prevention/fecal or other testing/flea control/microchip that are not current and are required for boarding. In addition, a \$56.00 office call may be applied.

Initial: _____

Should my pet require medical care while boarding, I understand that every attempt will be made to reach me by phone. After the third attempt, I give my permission for treatment(s) needed to stabilize my pet. As the owner or agent, I hereby give my consent for Mobile Vet Connection to perform any and all emergency treatment as needed. I expect the Mobile Vet Connection to use reasonable care and judgment in performing the procedure(s). Regardless of the outcome of any procedures, I accept financial responsibility for all charges incurred, and I agree to pay for those charges at the time of release of my pet.

Initial: _____

***** Or *****

Do Not Resuscitate (D.N.R.)

In the event that an emergency situation should arise while my pet(s) is/are in the care of Dr. Jyl and the Mobile Vet Connection, I decline any and all life saving medical and resuscitation procedures to be preformed.

Initial: _____

California Code of Regulations 2030d requires us to inform you that personnel might not be on premises after hours. I understand that my pet is not under constant observation, and that there is no attendant on premises at night. I do not hold Dr. Jyl Rubin or the Mobile Vet Connection and staff responsible for any illness, injury, or loss that occurs as a result of my pet's own activity. If I do not pick up my pet within three days of the agreed upon pick up date, he/she can be considered abandoned, and the Mobile Vet Connection can dispose of the pet. In the event of such disposal (adoption, sale or euthanasia), I will not be relieved from paying all accumulated charges nor from paying all legal fees /court costs.

Signature

Date

Signature of Witness

All New Clients Are Required To Leave A Credit Card On File.