



BOARDING POLICY

I, _____ am leaving my pet, _____(s) in the care of the staff at Valley View Veterinary.

I understand that Dr. King, Dr. Hartman and the staff at Valley View Veterinary Hospital will use all reasonable precautions against injury, illness, escape, or death of my pet. In the event complications arise or my pet becomes ill, I give full consent to the doctors and staff to perform whatever actions or treatments reasonable, necessary, and in the best interest of my pet.

_____INITIAL

Valley View Veterinary Hospital requires **ALL** boarding pets to be current on vaccinations. (dogs: Bordetella and Rabies) (cats: RCCP/FelV and Rabies) If I am unable to provide proof of vaccination or my pet's vaccines are not current, **Valley View Veterinary is authorized to vaccinate my pet.** _____INITIAL

Items/personal property left at the kennel with my pet will be cared for to the best of the staff member's abilities. (Blankets and beds will be washed if soiled, leashes hung up, etc). **I understand it is my choice to leave personal items with my pet.** All necessary pet care such as blankets, bowls, and food is offered to be provided by Valley View Veterinary if I do not bring my own. **Therefore I do not hold Valley View Veterinary Hospital liable for any lost or damaged property.** (For example: some dogs will chew their beds, toys, or leashes) _____INITIAL

If your plans change and you need to board your pet longer than expected, please call our office and let us know so that we can ensure we have enough kennel space.

I assume responsibility for all charges incurred in the care of the animal. I understand that these charges must be paid at the time of release and that a deposit may be required for long-term boarding.

I have read and agree to the above information

Signature: _____

Date: _____