

Signature of Owner/Responsible Party

Guest Boarding/ Day Care Information

Client Name:		Pet's Name:			
Arrival Date:Pick-U	p Date:	Number of Ni	ghts <u>:</u>	Intake Rec	e pt :
Guest is staying in: SUITE	– ROYAL:	GRAND:		VILLA:	
CABIN: COTTAGE	: SH/	ARING SPACE?	YES 🗖	NO 🗆	
I consent to my dogs shari ** Important Notice: Due to d fighting and/or food guarding	lifferences in enviror	nment, when board	ding multip	le pets together, u	ncharacteristic
I understand that S	unday boarding	pick up includ	es board	ing fees for Su	nday itself
Roardi	ng and Day Care	Vaccino/Tosti	na Poaui	roments	
Vaccines must be current (and participate in group play at this Bordetella. Vaccines required from internal/external parasite the right to vaccinate any animal	s facility. Vaccines for cats: Rabies, FV es and have had a r	required for dogs /RCP and Feline L negative intestina	s: Rabies, [eukemia. Il parasite	DHP-P, Influenza Both cats and do test in the past y	(H3N8/H3N2), and gs must be free ear. We reserve
Pet is CURRENT : □) Pet NEED	S vaccines and	or intest	inal parasite te	est: 🗖
In order to maintain a parasite-free facility, pets entering the hospital with fleas, ticks and/or testing positive for intestinal parasites will be treated, and the appropriate fees will be applied to the invoice.					
Medications to be administered while pet is boarding: * Administration fee for prescription medications is \$7.00 per day. <i>Medications must be presented in their original/properly labeled containers.</i>					
1) Medication:	Tab/Capsule/Drops Gi Tab/Capsule/Drops Gi Tab/Capsule/Drops Gi	iven () times per iven () times per iven () times per	day. If given day. If given day. If given	once daily, administe once daily, administe once daily, administe once daily, administe once daily, administe	er in the AM or PM er in the AM or PM er in the AM or PM
If my pet should require unforeserreach me, I approve (Please INITIA		•	Richter Anim	nal Hospital and Pet	Resort cannot
Perform any (including emergency) services/treatments the veterinarian deems necessaryI authorize care and/or treatment up to: \$Please do not provide any treatment without my approval.					
We will always make every effort to contact you if any medical attention is needed for your pet					
Emergency Contact Numbers:	() -		() -	
I have read, fully understand, a	nd agree with the o	contents of this bo	oarding/da	ycare agreement	

Date

For Dog Daycare Use: The dog(s) listed need an Evaluation to enter the daycare program. YES □ NO □ Group:					
Note: For the safety of all, dogs entering the daycare program to play with other dogs are required to pass a behavior evaluation. There is a one-time fee of \$15 for this evaluation. <i>All dogs over the age of 6 months must be spayed or neutered to participate in daycare.</i>					
STANDARD BOARDING OPTIONS:					
Daycare (group play) Monday Tuesday Wednesday Thursday Friday \$19 per day \$19 per day \$19 per day \$10 per day <td< td=""></td<>					
Special Treats / Options: (Please Choose the Option and Days)					
Stuffed Kong Toy: \$5/day					
Boredom Buster Package: \$25 per day (includes daycare AND two treats)					
Monday Tuesday Wednesday Thursday Friday					
SUITE BOARDING OPTIONS:					
Suites are equipped with 24/7 web cam access/raised bed/flat screen TV and raised feeding station. **Stuffed Kong Toy AND Frozen Pupcicle Treat INCLUDED each day with Suite Boarding** (Please choose the days you would like your pet to enjoy doggie daycare): Daycare Monday Tuesday Wednesday Thursday Friday					
(group play) \$12 per day					
□ Professional Grooming* (needs appt): □ Basic Bath*:*additional fee applies					
Belongings: List any belongings that you are leaving with your pet (ex. Food, Blankets, Toys, Etc.). Please note: we will do our best to take care of all belongings left. Items are left at pet owner's own risk; we cannot be responsible for lost or destroyed items. Items left:					