

Exotic Boarding Form

Boarding Drop Off Date: _____

Boarding Pick Up Date: _____

Pet Parent Info:

First

Last

Email

Phone Number

Pet's Name: _____

Species: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Diet (Please Choose One):

Own Food () Clinic Diet (Zupreem) () Combination of Own and Clinic ()

(You can bring their own food including fresh food like fruits and vegetables to be kept in the fridge)

- Please Make Sure to List all Dietary Restrictions; Example: NO SEEDS*

Belongings:

Please List any belongings that will be staying with your pet. This will help in having everything ready for you when you pick up. We do recommend labeling your items with a Sharpie. Please be specific. Example: Red Tupperware container with treats, white sheet, purple dog bed with hearts, etc)

_____ (Initial) I acknowledge that accidents may happen and although we take major precautions to ensure your items stay with your pet, some items may become lost, destroyed or accidentally thrown away during long stays and I will not hold ABC Animal and Bird Clinic accountable.

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Is your Pet current on any medications? : Yes () No ()

Name of Medication	Frequency	Last Given

* All medications must be in their original prescribed containers including Over The Counter vitamins and supplements. *

Social Media Authorization:

ABC likes to share interesting stories or cute photos of our GREAT patients on Facebook or other approved social media.

___ I agree to have my pet’s photo shared on social media.

___ I do NOT agree to have my pet’s photo shared on social media.

Signature

Date