



# Parkway Animal Hospital BOARDING CHECK-IN

Check-in Date: \_\_\_\_\_

Expected Check-out Date: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Pet Name: \_\_\_\_\_

Age: \_\_\_\_\_

Breed: \_\_\_\_\_

Weight: \_\_\_\_\_

Is anyone else authorized to pick up your pet?  No  Yes Name: \_\_\_\_\_

The staff at Parkway Animal Hospital welcomes your pet to this home away from home. Our staff will pamper your pet while you are away. To do so, however, we need an understanding of the routines at home.

**Medications/Supplements:** please list all medications and dosage instructions. *Note: all medications and supplements should be provided in the original container and be labeled with the pet's name.* There is an additional fee to administer medications.

Medication	Dose	Frequency	Time Last Given
		<input type="checkbox"/> AM <input type="checkbox"/> NOON <input type="checkbox"/> PM	
		<input type="checkbox"/> AM <input type="checkbox"/> NOON <input type="checkbox"/> PM	
		<input type="checkbox"/> AM <input type="checkbox"/> NOON <input type="checkbox"/> PM	
		<input type="checkbox"/> AM <input type="checkbox"/> NOON <input type="checkbox"/> PM	
		<input type="checkbox"/> AM <input type="checkbox"/> NOON <input type="checkbox"/> PM	

**Feeding Instructions:**

My pet's current pet food is \_\_\_\_\_.

While my pet is boarding, I would prefer (s)he is fed the food provided at home rather than the age-appropriate Hills Science Diet foods (puppy/kitten, adult, adult light, or senior) that you normally provide your guests.  No  Yes

**Feeding Restrictions:** my pet is on a restricted diet for:  Not applicable  
 medical reasons  stomach sensitivity  skin allergies  other

(S)He last ate at: \_\_\_\_\_  AM  PM

How often should your pet be fed?  Once in the AM  Once in the PM  Twice a Day

Leave food available at all times

Other

How much should we feed him/her at each meal? \_\_\_\_\_

Please describe your pet's appetite at home:  Great  Average  Finicky

**Walk & Exercise**

Our guests are given 3 walk/exercise periods per day in our enclosed play yard (dogs) or our indoor facility (cats). You may elect for additional play periods at a minimal fee.

**Personal Items:** While we recommend that you avoid leaving any of your pet's belongings during his/her stay, if you decide to leave any belongings, we cannot guarantee that you will receive them back in the same condition in which they arrived.

Are you leaving any of your pet's belongings?  YES  NO

If so, please describe each item: \_\_\_\_\_

**Bathe or Groom Request** for your pet prior to going home:

Please  bathe OR  groom my pet. *Note: these services may require a later pick-up time.*

**Special Instructions or Requests:** \_\_\_\_\_

*Should your pet become ill, the staff at Parkway Animal Hospital will make an effort to reach you, or your authorized agent, prior to initiating treatment. However, the attending veterinarian may initiate critical care as deemed appropriate until such time as you or your authorized agent are contacted.*