

Twin Pines Veterinary Clinic Boarding Agreement

102 Industrial Road, Hinckley, MN 55037

320-384-7004

1. **CHECK IN/OUT TIME:** Boarding drop-offs and pick-ups are done from 8:30am – 5pm Monday – Friday, 8-10am and 4-6pm on Saturday and Sunday. Check out time is 12pm, if a pet stays past check out time a ½ day boarding charge will accrue. PLEASE BE ADVISED THAT TRAINED PERSONNEL ARE NOT ON THE PREMISES 24 HOURS A DAY, BUT WE DO MONITOR WITH VIDEO SURVEILLANCE 24 HOURS A DAY, 7 DAYS PER WEEK. Initial: _____
2. **VACCINATIONS:** Proof of current vaccinations is required on or before the time of boarding drop-off for all animals. This proof must be in writing from the licensed veterinarian who administered the vaccinations. Home or breeder administered vaccinations will not be accepted. Canine vaccinations required are Annual Distemper Combination, Bordetella, and Rabies. Feline vaccinations required are Annual Distemper Combination, Feline Leukemia, Rabies and history of a negative Feline Leukemia/FIV test. All **vaccinations need to be given 7 days prior** to your pet's stay. It is the Owner's responsibility to provide this proof at the time of boarding or we will be unable to accept your pet. No exceptions please. Initial: _____
3. **FLEA AND TICK CONTROL:** We recommend that all animals be treated for fleas and ticks. Please advise us of the product used and date administered_____. If found with fleas or ticks we will treat and additional charges will incur. Initial: _____
4. **SPECIAL FEES:** Any oral or topical medications administered while boarding are \$1.00 per night, and \$3.00 per night for insulin or injectable medications. Ask the receptionist for information on cost of other special requests such as extra walks or playtime. If you are boarding your pets together and there are problems such as fighting or an unaltered female going into heat, if necessary, we may separate them at an additional charge to the Owner. Initial: _____
5. **LIABILITY:** Owners may leave personal items such as blankets, toys, bedding, etc., for your pets. Please understand that we will make every effort to keep track of those items while your pet is boarding but we are not responsible for these items if lost or damaged. If you can't bear to lose it or it is not replaceable, please leave it at home.
6. **MEDICAL ATTENTION:** In the event your pet becomes ill or injured during their stay, we will do our best to contact you at the numbers you leave for us. If we cannot reach you, Twin Pines Veterinary Clinic, PA will perform any medical care necessary under the circumstances at regular office/hospital fees. We hope this never becomes necessary, but we feel strongly that we must do what is best for your pet while in our care. Initial: _____

7. **FEEDING OPTIONS:** The food included in the nightly boarding price is Fromm or Science Diet. For \$2.00 additional per can we will provide wet food with the dry to encourage them if they are not showing interest in the dry food. I authorize this feeding option if my pet hasn't eaten after 24 hours Initial: _____
(Circle One) Y N

OR

I would prefer that my pet be fed canned food only instead of dry food for an additional charge of \$2.50 to \$10.00 per day, depending on the size of my pet. Initial: _____
(Circle One) Y N

8. ADDITIONAL SERVICES:

_____ Initial: _____

I am the owner or legal authorized agent for the above named animal(s). I agree to the policies set forth by Twin Pines Veterinary Clinic, PA, and do hereby agree to pay any and all charges prior to the discharge of the aforementioned pets.

Signature Date Staff Check-In Initials