

BOARDING POLICY AND RELEASE

Owner's Name: _____ **Pet's Name:** _____

I understand you cannot guarantee the health of my pet listed above. I understand and will not hold the clinic responsible for conditions that are unavoidable in boarding kennels, such as, but not limited to, weight loss, hair loss, upper respiratory infections, bronchitis, diarrhea and fleas/ticks. I understand all pets admitted to the clinic must be protected against communicable contagious diseases and must be free from internal and external parasites or will be treated on entry or discovery at the owner/agent's expense.

I understand in the event of illness the staff will immediately attempt to contact me or my agent to discuss problem and treatment options.

In the event that my agent or I are unavailable (please **initial one** of the following):

- _____ Please perform any diagnostics and treatments deemed necessary.
 _____ Perform only emergency and supportive care. Notify me for permission to begin any other treatment.
 _____ Do not perform any diagnostics and/or treatment until I am notified and consent for you to evaluate and treat as recommended.

Should an emergency arise, I authorize the medical staff to sedate this pet and/or perform such emergency procedures as may be necessary for the health of my pet until I can be contacted. I agree to pay in full for necessary rendered for and to my pet listed above.

I understand that the clinic is not responsible for lost or damaged items left with the pet, including but not limited to leashes collars, toys and bedding.

The clinic is to use all reasonable precautions against injury, escape or death of my pet. The clinic and staff will not be held liable for any problems that develop provided reasonable care and precautions are followed. I understand that any problem that develops with my pet will be treated as noted above and I assume full responsibility for treatment expense incurred.

I understand that Belpar Pet Care Centre is not a 24 Hour facility and there may be times when my pet is left unattended. I will not hold Belpar Pet Care Centre or its employees liable for events that may transpire during those unattended times

I will call if my "pick-up date" changes so that you can plan accordingly. If I neglect to pick up a pet within five days after the date scheduled for discharge and do not notify you within that time period, you may assume that this pet is abandoned and are hereby authorized to relinquish ownership to Belpar Pet Care Centre or Local Humane Society.

_____ (initial here) As a courtesy to our clients, daily photo texts are available to be sent. At times these photos are used for marketing purposes and social media. I give my permission to Belpar Pet Care Centre to use my pet's photo for their office and the Uniontown Veterinary Clinic Only.

I have been provided with a copy of this boarding policy and admission form.

Owner/Agent:

Print Name: _____ Preferred Contact Number: _____

Signature: _____ Date: _____

Alternate Contact Name: _____ Alternate Contact Number: _____

Person(s) granted permission to pick up pet other than self:

_____ Contact Number: _____