

Prineville Veterinary Clinic



Professional, Compassionate Care For Large & Small Animals

Dr. Rhet Schultz DVM
Dr. John Carr DVM Dr. Sean Panella DVM

(541) 447-2179

BOARDING AGREEMENT

Rates start day of arrival. If dropped off between 7:30 am and 1:00pm the full day rate will be applied. If dropped off between 1:00pm and 5:00 pm the ½ day rate will be applied. If picked up between 9:00 am and 1:00 pm the ½ day rate will be applied. If picked up between 1:00pm and 5:00 pm the full date rate will be applied. There is no fee for after hours pick up if scheduled between 8:00- 9:00 am or 5:00- 6:00 pm.

Date of Drop Off _____ Date of Pick Up _____ After Hours 8:00- 9:00 am or 5:00- 6:00 pm _____

Owner _____ Person to contact in case of emergency _____

Emergency telephone number(s) _____

Pet(s) Boarding _____

Feeding Instructions _____

Pet's Belongings (Toys, bed, ect) _____

Medications _____

Special Instructions or Requests _____

FOR YOUR PET'S HEALTH

Vaccinations

To insure the protection of all pets under our care, the following must be up-to-date:

Dogs: Rabies Due Current Dhpp Due Current Bordetella Due Current
Cats: Rabies Due Current Fvrpc Due Current Felv Due Current

If not up-to-date or unable to provide proof of vaccination, I understand my pet(s) vaccinations will be updated in accordance with the above policy, at owner's expense.

In addition, if any parasites are observed on your pet(s) while boarding, they will receive treatment, at the owner's expense.

Grooming services

Nail Trim \$13.50 _____

Teeth Brushing \$19.00 _____

Bath under 20# \$30.00 _____ 21 to 50# _____ Over 50# _____

Medical Illness policy

One of the advantages of boarding your pet(s) at Prineville Veterinary Clinic is that veterinary attention is readily available should the need arise. If your pet(s) becomes ill we will call the emergency numbers provided above regarding your pet's symptoms, treatment options and estimate of additional costs. If no one can be reached please indicate your wishes below should your pet(s) require treatment to relieve immediate discomfort or to resolve an important medical condition.

_____ Please perform whatever services the doctor deems necessary for the best care of my pet until someone can be reached.

This includes only non-elective treatments and necessary diagnostics.

_____ I authorize up to (Please indicate amount) \$ _____ in medical care for my pet(s) until someone can be reached.

_____ Do not administer any medical treatment until specific authorization is given.

I have read and understand this agreement; I fully intend to pick up my pet(s) on the above specified date. If circumstances change I will notify the veterinarian of a new pick up date. Pets left at the clinic for more than 48 hours after the agreed upon pick up date, will be considered abandoned & will become the Property of Prineville Veterinary Clinic LLC.

_____ Date

_____ Owner/Agent for Pet(s)