



Aina Haina
PET HOSPITAL, INC.
Pets, People, Compassion

Boarding Consent Form

Boarding Dates: _____ to _____

Client's Name: _____ Emergency Contact #: _____

Will you be traveling: **Domestic** **International** Email if out of country: _____

Pet's Name: _____ **Weight:** _____ **Medical Alerts:** _____

Please vaccinate at this boarding visit: _____ Yes (exam required) _____ No

Current on Monthly Heartworm: Yes No Flea/Parasite Prevention: Yes No Product: _____

Pet's Name: _____ **Weight:** _____ **Medical Alerts:** _____

Please vaccinate at this boarding visit: _____ Yes (exam required) _____ No

Current on Monthly Heartworm: Yes No Flea/Parasite Prevention: Yes No Product: _____

Pet's Name: _____ **Weight:** _____ **Medical Alerts:** _____

Please vaccinate at this boarding visit: _____ Yes (exam required) _____ No

Current on Monthly Heartworm: Yes No Flea/Parasite Prevention: Yes No Product: _____

Boarding Charges: (per night stay)

Up to 10lb \$30.00 11-25lb \$31.00 26-50lb \$32.00 51-80lb \$33.00 >80lb \$34.00 Feline \$25.00

Additional Boarding Services:

_____ Nail Trim (\$12.00) _____ Anal Gland Expression (\$10.00) _____ Nail Trim & Anal Gland Expression (\$16.00)

If my pet becomes sick or injured during its stay, I give authorization to have my pet treated by the attending veterinarian. I understand the staff will attempt to contact me as well to inform me of my pets status, and I am responsible for all charges that may apply.

I understand that as a veterinary facility, there is a small chance that my pet can come into contact with parasites such as fleas, ticks, or worms. I also understand that my pet could potentially come into contact with infectious bacterial or viral agents. Current vaccinations protect against the vast majority of these illnesses. I will not hold Aina Haina Pet Hospital liable for any parasite, viral, or bacterial illnesses that may arise from my pet staying at Aina Haina Pet Hospital.

I hereby certify that I have read and fully understand the above document. In signing this, I release all liability in this matter.

_____ Print Name

_____ Signature of Primary Owner

_____ Date