

WVH



Pet Hotel

Boarding Contract

Owner: _____
Address: _____
Phone: () - _____
Email: _____

Pet's Name: _____
Species: Dog () Cat ()
Sex: Male () Female ()
Age: _____ years _____ months

General Terms: Wexford Veterinary Hospital will exercise responsible care for the safety of your pet, and to keep the boarding premises safe and properly enclosed. Pets will be fed and watered regularly, and housed in clean, safe quarters. Wexford Veterinary Hospital cannot guarantee against accidents, and we cannot be liable for loss or damage caused by or to our pet guests at this facility. Owner agrees to be solely responsible for any and all attacks or damage caused by owners' pet while it is at this resort.

Payment/Nonpayment: Wexford Veterinary Hospital charges for boarding space by the day. Owner agrees to pay the rate for boarding in effect on the day the pet is checked out of the resort. Payment balance is due upon checkout. If any charges are not paid when due, interest will accrue at 1.5% per month, or the maximum rate allowed by law. All collection expenses, including attorney fees, will be paid by the owner. Acceptable forms of payment are: cash, check, Discover, Mastercard, and Visa. **We do not accept American Express.**

Check in/out Times: Check out time is by 11:00 AM. Any pet checked out before 11:00 AM will not be charged the boarding fee for the day of check out. Any pet checked out after 11:00 AM will be charged for the day of check out. Check in and check out times are only during normal appointment hours. Sunday check out on appointment basis only. **There will be an additional charge of \$25.00 plus that days boarding fees to schedule a check out on Sunday.**

Personal Items: We make every effort possible to make your pet feel at ease while he/she is staying with us. Wexford Veterinary Hospital does not recommend bringing personal items from home as they may get lost in the laundry or soiled. Wexford Veterinary Hospital is not responsible for lost or damaged personal items.

Vaccinations: Vaccinations are for the protection of your pet, we cannot make exceptions to vaccination requirements. If proof of vaccination is not on file or provided from another veterinarian, the pet will be vaccinated and examined at the owner's expense on the arrival date, and has higher risk of contracting an illness during their stay. There is not a physical exam fee when the kennel cough or flu vaccines are boosted during a pet's stay.

Abandonment: If the pet is not called for within 10 days after the designated checkout time, the pet will be considered abandoned and will be handled in accordance with state law. All adoption fees and other incurred expenses will be the responsibility of the owner.

Departure Baths: We offer a complimentary departure bath for all dogs staying 3 or more consecutive days. If you do NOT want your pet to receive the departure bath, please notify representative at check-in. If your pet is here for less than 3 days and you would like to purchase a basic bath, please let a representative know.

Geriatric Pets: Older pets may experience additional stress in the lodging, daycare, grooming, or training environment. Wexford Veterinary Hospital is devoted to providing exceptional care for guests, including geriatric pets. Your signature acknowledges that you are aware of and accept all age related risks to your pet. **There will be an additional charge of \$10.00 per day for geriatric pets with mobility issues.**

Medications: Medications, supplements, or other items will be administered as directed, but medications must be presented in their original containers with instructions for administration. If your pet is on more than 3 medications there will be an additional fee to administer. **There will be an additional charge of \$5.00 per day to administer any type of subcutaneous injection including insulin.**

Treatment Authorization: The owner agrees that Wexford Veterinary Hospital, in its discretion, give first aid, medication, or other attention we deem it necessary for the health, and safety of your pet. Wexford Veterinary Hospital is authorized by the owner to provide veterinary care, including emergency care, at the owner's expense. If we believe that your pet is in need of care, time permitting we will attempt to contact you before providing that care, but this document serves as our authorization to provide veterinary care for your pet in the event we are unable to reach the owner. The owner is responsible for expenses of veterinary care, whether or not you have been reached in advance. Your signature on this authorization permits Wexford Veterinary Hospital to make reasonable care decisions regarding your pet; and the owner agrees to pay for all costs incurred for such treatment. In the unlikely event that a pet passes away while a guest of Wexford Veterinary Hospital we will contact you and discuss your options of body care with you.

Monitoring: Staffing at Wexford Veterinary Hospital varies by season and days. If at any time a staff member is not present on the premises, the hospital is locked, monitored by an off-site fire alarm company, and the pets are able to be observed remotely by video camera. For staff safety, dogs are not walked between the hours of 9 pm and 6 am.

I hereby agree to the foregoing as the owner of the aforementioned pet.

I further certify that my pet is in good health and has not been ill with any communicable condition nor to my knowledge been exposed to any communicable diseases within the last 30 days. Moreover, I certify to the accuracy of all information given about my pet and have discussed any previous signs of aggression or threatening behavior toward any person or animal. I have read and understand the entire boarding contract.

Date: ____ / ____ / ____

Signature (Owner/Agent): _____

Check-In Information

| | |
|-----------------------------|---------------------------|
| Pet's Name: | Age: |
| Primary Contact Name/Phone: | Local Contact Name/Phone: |
| Dates of Stay: | Phone Number for Photos: |

Dogs: (charges are per cage per night)

Cats: (charges are per cage per night)

___ Standard Run: 50lbs and over (\$58.00)**

___ Small Cat Cage: 0-10lbs (\$25.00)

___ Family Run: multiple dogs (\$95.00)

___ Large Cat Cage: 10-20lbs (\$35.00)

___ Large Cage: up to 25lbs (\$45.00)

___ Cat Condos: 1 condo \$48.00*

___ Cat Condos: 2 condos \$78.00*

___ Cat Condos: 3 condos \$98.00*

* Depending on space/# of pets.
 ** If pets are sharing a Standard Run it will be \$90.00 per night
 *** 3 pets in any Run will be \$30.00 per night for the 3rd pet

Feeding Instructions: (If you did not bring your pet's food, there will an additional charge of \$2.00 per day per pet.)

Times per Day: 1 2 3 OTHER _____

Amount per feeding Dry _____ Canned _____

If food is not provided Wexford Veterinary Hospital will provide Purina EN K9 & Feline Diet

Medications/Supplements: _____

Personal Belongings (WVH is not responsible for lost, soiled or broken items)

FOOD _____ TOYS _____ LEASH _____

TREATS _____ BEDDING _____ COLLAR _____

DISHES _____ SPECIAL INSTRUCTIONS: _____

Vaccinations Required:

DOGS: DHPP, Rabies, Bordetella, and Influenza

CATS: FVRCP and Rabies

____ Vaccines are current (within the last year)

____ Vaccines require updating. Please have the veterinarian perform that service while here.

Note: If a veterinarian cannot verify any vaccine then the required vaccines will be given and charged to your invoice. Vaccines given by owners will NOT be accepted at this facility.

Luxury Guest Packages (Optional):*prices are per pet per day*

Cat Enrichment Room \$10.00 per hour ____

3 PAW: 1 Extra Playtime Session & a Bedtime Treat \$14.65 ____

4 PAW: 2 Extra Playtime Sessions & a Bedtime Treat & Text Picture(s) Daily \$25.15 ____

5 PAW: 2 Extra Playtime Sessions & a Bedtime Treat & Text Picture(s) & Nail Dremel \$31.45 ____

****All dogs staying 72+ hours will receive a complimentary “go home” bath. Pick-ups after 11am are charged for that day's stay.**

Ectoparasites: If fleas and/or ticks are observed on your pet, then your pet will be treated based on a staff veterinarian recommendation and charged to your invoice. If your pet should become ill or unexpectedly injured during its stay, we will attempt to contact you and an exam will be offered at a discounted rate of \$40.00. **Any appropriate treatment/medications will be charged accordingly.**

If any serious or emergency condition develops, all efforts will be made to contact you before initiating an appropriate treatment. If contact is unavailable or circumstances dictate medical intervention, treatment will be initiated at the doctor’s discretion. I hereby understand and authorize performance of the above medical, diagnostic, treatment and/or vaccination procedures by Wexford Veterinary Hospital. I understand that I am assuming full financial responsibility for all services rendered, and that payment in full is due at the time of release.

Date: ____ / ____ / ____

Signature (Owner/Agent): _____

Thank you for trusting Wexford Veterinary Hospital's Pet Hotel!