



BOARDING ADMISSION FORM

865-986-5450

601 Highway 321 N

Lenoir City, TN 37771

lenoircityanimalclinic.com

Owner Information

Name (Primary Contact): _____

Mobile #: _____ Alternate #: _____

Patient Information

Pet Name: _____ Species: _____

Breed: _____ Age: _____ Color: _____

Weight: _____ Sex: Male Neutered Female Spayed

Arrival Date: _____ Departure Date: _____

Medication

Please list all medications and dosing instructions for your pet. Please be aware there is an additional fee to administer medication.

NAME OF MEDICATION	QUANTITY	TIMES PER DAY

Belongings: We encourage you to allow us to provide the supplies your pet will need during their stay with us. Your pet will be given bedding, food, and bowls. Should you choose to bring some of your pet's belongings, please know that there is a risk of it being lost, soiled, or damaged, and we assume no liability for damaged or lost property.

Please list any belongings you are leaving with your pet: _____

If You Are Boarding More Than 1 Pet: **Board:** Together Separately | **Feed:** Together Separately

Kennel Bath: Would you like your pet to be bathed and towel-dried before pick up? Yes No

Concerns: Any issues we should know about your pet? _____

Would you like your pet to see a veterinarian regarding the above matter(s)? Yes No

Vaccine Requirements: If vaccinations were done elsewhere, proof of vaccinations must be provided before pet can be dropped off for boarding. If vaccinations are needed at the time of drop off, and there is not a current exam on file, there will be an additional charge for the exam as well as the required vaccinations. Dogs must have negative fecal test within the past 12 months; bordetella vaccination within the past 6 months; DHLPP & rabies vaccination must be current. Cats must have current FVRCP and rabies vaccination.

Fleas & Ticks: All pets will be inspected for fleas and ticks, and if any are found on your pet, they will be treated at owners expense.

Abandoned Pets: If you have not picked up your pet or communicated with us 7 days past your pet's departure date, your pet will be considered abandoned and action will be taken to re-home the pet or they will be released to animal services.

Authorization: I hereby authorize Lenoir City Animal Clinic (LCAC) to board my pet for the dates stated above. If care becomes a necessity, LCAC will do their best to contact me with reasonable effort. If I cannot be reached, LCAC will provide care required and I will be responsible for the total cost of the care when I pick my pet up from boarding.

Signature: _____ **Date:** _____