

Allentown Cat Clinic, PC., 4090 W. Tilghman Street, Allentown, PA 18104

Boarding Agreement

Client Name: _____ Name: _____
Address: _____ Breed: _____
_____ Sex: _____
Telephone: _____ Color: _____
Boarding _____ Birth Date: _____
Period: _____
Dates of last vaccinations: _____
(FOR OFFICE USE)

Dietary Needs: _____

Are any medicines necessary while boarding? ____yes ____no
If yes, medications must be in the original veterinary labeled container with instructions for administration.
Give names of any medications, the dosage to be given and the last time they were administered:

REQUIREMENTS FOR BOARDING

1. All cats boarding with us **MUST** be up to date on their vaccinations. If vaccines were given elsewhere, proof of vaccination is required one week prior to boarding. If you are currently a client of Allentown Cat Clinic and your cat has been vaccinated for the prior two years and is currently due, we will vaccinate during the cats stay. There is an examination fee charged along with the vaccine fees. A full days board is charged for the first and last days, no matter what time your cat is admitted or released. **For cats that are not currently our patients, we will require the owner to pay the total of days boarding, upfront, with cash or a credit card only.**
2. It is understood that your cat will be fed and properly housed in sanitary and safe conditions. If requests for special services are made, we will consider them and additional fees would then apply. Reasonable precautions will be used to prevent injury, escape or death of this cat. This clinic and staff will not be held liable for problems that develop provided reasonable care and precautions are followed. Personal items may be left at your own risk. We are not responsible for loss or damage.
3. All cats must be free of external parasites (ex. ticks, fleas, etc.), or they will be treated at owner's expense. We will comb your cat for fleas at the time of admission. **FLEA COMB RESULTS/TREATMENT:** _____
4. You understand that any problem that develops with your cat will be treated as deemed necessary by the Doctors and staff of **(IN EMERGENCY SITUATIONS, YOUR CAT WILL BE TRANSFERRED TO QUAKERTOWN VETERINARY CLINIC)** and you assume all responsibility for the treatment expenses involved. A reasonable attempt will be made to contact you prior to providing treatment, however, in the event you or your emergency contact cannot be reached, treatment will be provided. **YOU FURTHER UNDERSTAND THAT STAFF IS NOT PRESENT DURING NON-OFFICE HOURS.**
5. If you neglect to contact or pick up the above noted cat within 5 days after the scheduled pick-up date, and having received a written notice of failure to pick up, we will assume the cat is abandoned and handled in accordance with state law, and that doing so does not relieve you of your financial obligations.

I have read the boarding agreement and understand the clinic's policies.

Signed : _____ Staff Member's Initials: _____

Emergency Contact & Phone: _____