

Gibraltar Veterinary Hospital: Lodging Information Form

Client ID:
Client Name:
Telephone:

Patient ID:
Name:
Species:

Lodging From:

To:

Please complete the following, choose a treatment option, and sign below.

1. Did you bring your pets own food? (We feed SD Sensitive Stomach dry) If so what brand? _____	Yes	No
2. Feeding instructions: Morning amount: _____ Evening amount: _____ Other time/amount: _____ Last time your pet was fed: _____		
3. Is your pet on Flea or Tick prevention?	Yes	No
4. Does your pet use an elevated food stand?	Yes	No
5. Has or does your pet chew bedding?	Yes	No
6. If you are boarding 2 pets can they be in the same kennel?	Yes	No
7. Does your pet require medication while boarding? (If yes please list below) Medication: _____ Dosage: _____ Time Given _____ Medication: _____ Dosage: _____ Time Given _____	Yes	No
8. Please list any additional ALLERGIES or Comments (i.e. Allergy to chicken): _____ _____ _____		
9. List and describe any personal items being left with your pet (i.e. Red leash): _____ _____ _____ <p style="text-align: center; margin-top: 5px;">Please understand that G.V.H. cannot be responsible for lost personal items.</p>		

TREATMENT: In case of an emergency, illness or injury of : I and/or Agent give GVH consent to treat my pet as our doctor(s) deems necessary and ACCEPT all charges. <p style="text-align: right; margin-right: 20px;"><i>(cirlce yes or no)</i></p>	Yes	No
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We will call to notify you if a problem occurs. Any treatment administered to your pet while boarding will include an exam fee and/or medication charged. If a fecal is taken at time of boarding and is positive for parasites, or fleas/ticks are found on your pet, they will be treated during the boarding period at the your expense. Please review our 'Client Information Regarding Lodging' form.

<b style="color: red;">Emergency Contact: _____ Phone number: _____
<p style="background-color: yellow; display: inline-block;">CLIENT SIGNATURE :</p> _____

EXTENDED LODGING SERVICES

Client Name:
Arrival Date:

Client ID:
Departure Date:

Pet Name:
Cage Number:

Thank you for choosing Gibraltar Veterinary Hospital for your pet's lodging needs. All pets will enjoy the following premier pet lodging services while staying with us:

- ✓ Sanitary, comfortable, appropriately-sized suites.
- ✓ Scheduled feedings based on their home schedule.
- ✓ Fresh water throughout the day.
- ✓ 3 brief walks daily.
- ✓ Administered medications if necessary.

If you wish to make your pet's stay more luxurious, you may choose from the following deluxe options. *Choose as many extended services as you wish!*

Extended Services	Price	Quantity
<input type="checkbox"/> Daily Picture Mail Enjoy text message updates from your pets with a picture of their happy faces. <i>Phone number:</i> _____	\$5 per message	
<input type="checkbox"/> Playtime! Your pet will enjoy 15 minutes of individual playtime with activities like fetch, basic obedience, or playing with their favorite toy. You choose the activity! <i>Desired activity for playtime:</i> _____	\$12 per session	
<input type="checkbox"/> Extended Walk Extended walks for your pet will help to expend extra energy. Pets will get 15 minutes of additional walking time with our staff.	\$12 per walk	
<input type="checkbox"/> Coat Brushing Our staff will brush your pet's coat while giving them some extra loving!	\$12 per brushing	

TOTAL Extended Services \$ _____

I authorize GVH employees to perform and charge for the above extended services I've chosen for my pet.

Client Signature

Date