

FRONT RANGE VETERINARY CLINIC AND PET LODGE

Cat Boarding Consent Form

Vaccine Verification:

Distemper Due On: _____ Rabies Due On: _____

Any recent coughing, sneezing, vomiting, or diarrhea? (if yes, please explain)

Any other concerns, problems, or special considerations that we need to know about?

Will we be administering any medications? **Yes** **No** (if yes, fill out detail below)

	Medications	Dosing Instructions
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

Diet: Kennel Food (Iams Low-Residue) / Own Food (Brand: _____ Amount Fed: _____)

Other Special Instructions:

Consent for Treatment (Please Check One of the Following):

I GIVE permission for Front Range Veterinary Clinic to examine/treat my pet(s) while boarding, should it be considered necessary by the veterinarian.

Maximum acceptable dollar amount without contacting me first: \$ _____

I DO NOT give permission to examine/treat my pet(s) while boarding. I would like to be contacted first. I understand that, if necessary, Front Range Veterinary Clinic will perform only emergency or life-saving measures until contact is made, and I accept financial responsibility for these services, if necessary.

I accept and agree to the terms above. I understand that payment will be due in full at the time of departure.

Signature: _____ Date: _____

Phone Number(s) Where You Can Be Reached: _____