

Idaho Veterinary Hospital

1420 N. Midland Blvd

Nampa, ID 83651

(208) 466-4614

Boarding Release Form

Boarding from: / / To: / /

Client ID:
Client Name:
Address:

Telephone:
Cell:
Work:

Patient ID:
Name:
Species:
Breed:
Sex:
Color:
Markings:
Birth Date:

FOR HOSPITAL USE ONLY

Vaccinations Current:	Yes	No	Current Bordetella:	Yes	No
Vaccinations given at:	IVH		Other Hospital Name: _____		
Medical Appointment During Boarding:					
Being seen for:			Date:	Time:	

Emergency Contact: _____ Phone: _____

Special item(s) left with pet: _____

Are any medicines necessary while boarding? _____ yes _____ no

Give names of any medications and the dosage to be given:

REQUIREMENTS FOR BOARDING

1. All animals must be current on all vaccinations, including **Bordetella** (Kennel Cough).
2. All animals must be free of external parasites (ex. ticks, fleas, etc.), or they will be treated at owner's expense.
3. has my permission to do whatever is necessary should an emergency arise.
4. If a tranquilizer is necessary for treatment or handling, has my permission to administer such medication.
5. Pets may be dropped off or picked up during regular business hours. (Exceptions on holidays)
Early release must be prearranged and prepaid.

I have read the boarding requirements, agree to, and understand the hospital's policies.

Signed : _____