

Falconbridge Animal Hospital
1401 W. NC Hwy 54
Durham, NC 27707



Village Veterinary Hospital
50150 Governors Dr.
Chapel Hill, NC 27517

919-403-5591

919-967-4779

Client: _____
Date: _____
Phone: _____

Patient: _____
DOB: _____
Age: _____

Sex: _____
Species: _____
Breed: _____

Daycare Release & Instructions

If More Than One Pet: Keep Together Keep Separate

Best Contact Number Today: _____

Date(s): _____

_____ **initial** - For New Clients or those who come to us only for boarding we do require a once a year **Intake Exam** to be performed by our doctors to ensure the safety and health of your pet(s) if they will be staying with us more than twice.

Feeding instructions:

Does your pet need **breakfast**? Y or N **Lunch**? Y or N **Dinner**? Y or N
Can we give your pet **treats**? Y or N Can we give your pet **canned food**? Y or N

Medications: ALL medications must be in their original containers!

There is a fee of \$5.00 to \$12.00 daily for medication administration and monitoring of medicated pets. Please list current medications, including name of medicine, dosage, frequency, and when last given:

Medication	Amount Given	# of times daily	Already given today?	Do we need to give it today?

Other services desired at additional cost (please check):

_____ Bath (\$26-\$35) available if dropped off before 9am (no charge for daycare on bath day)
_____ Nail trim (\$17) _____ Anal Gland Expression (\$24)

I hereby authorize and direct the veterinarians and staff of Falconbridge Animal Hospital to board my pet for the dates listed above. I certify that my pet is free of external parasites and contagious diseases at presentation to the best of my knowledge. I authorize the hospital to perform any diagnostic or treatment procedures deemed necessary for my pet. However, staff will attempt to reach me prior to any unexpected treatment.

I understand that current **Wellness Exams, Distemper, and Rabies** vaccines all required for pets, as well as **Parvo, Bordetella, Flu Vaccine (H3N2)**, and a **Fecal Flotation for all dogs** before admission to the hospital. For those pets not current, vaccines will be updated as long as it is deemed safe and advisable by a veterinarian.

If I am unable to pick up my pet, _____ **is authorized to pick up my pet on my behalf.**

_____ Falconbridge & Village Vets can use my pet(s)'s photos on www.FalconbridgeAnimal.com and their Facebook pages. (Become our friend on Facebook!)

Signature of Owner or Authorized Agent

Date