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

919-403-5591



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

919-967-4779

Drop-off Consent

Client:			Sex:	
Date:	DOB: Age:		Species: Breed:	
Reason for visit:	Are you the pet's primary caregiver? Yes		Yes No	
I understand that current Wel as Parvo, Bordetella (6 mon Vaccine (H3N2) is recommer as it is deemed safe and advi	ths), and a Fecal Flotation ded for all dogs. Pets not	n for dogs before current on vaccin	admission to the es/testing will be	facility. Flu updated as long
I certify that to the best of my parasites, such as fleas or tic additional cost.				
Would you like your pet to ☐ Nail Trim (\$18 or include ☐ Ear Cleaning (\$27 or inc	ed with bath)	nal Gland Expre	ssion (\$25 or 1	
Medication Refills - Are th		ou would like to pi	ck up when you	return for your pet?
Name of I	Medication		Quantity	
		# of pills	# of bottles _	same as last time
		# of pills	# of bottles	same as last time
		# of pills	# of bottles _	same as last time
		# of pills	# of bottles _	same as last time
	its while it is here? ☐ Ye s can use my pet's photos	ent time for rush ho e for rush hour trains s \(\sum \textbf{No}\)	our traffic to allow	to arrive prior to that
Signature of Owner or	Agent Phone	number to read	h you today	Date