

Oak Ridge Animal Hospital
3308-A Edgefield Road Greensboro NC 27409

BOARDING RELEASE FORM

Arrival date:

Departure: Estimated time of pick up: ___

Pets picked up before noon will not be charged for that day.

Emergency contact: ___

I request that my dog receive a bath prior to discharge. Yes* No

*if your pet is receiving a bath, please plan to pick up between 3:30 - 4pm. You will not be charged for this day.

We have brought our own food to feed Yes No

Personal Items (limit 2): ___

(Medication administration fee: \$3.00 per day Insulin injections \$5.00 per injection)

Please check below:

Emergency care and minor treatment:

I authorize the staff of Oak Ridge Animal Hospital to immediately and without prior notification provide any emergency care necessary during my pet's stay. I understand that I will be notified of this emergency treatment as soon as possible.

I authorize the staff of Oak Ridge Animal Hospital to provide, without prior notification, any minor treatment (antibiotics, medication for diarrhea, etc.) necessary during my pet's stay. I understand that I will be made aware of this minor treatment at the time of discharge.

Emergency care ONLY

Minor treatment ONLY

Do not authorize:

I do NOT authorize any treatment (Emergency or minor) for my pet unless contacted at the above emergency number first. After speaking with the doctor, I will then make a decision regarding authorization of treatment.

All pets boarding at our hospital receive a Capstar oral flea prevention on upon entry and on the day of pick-up. This is included in the boarding fee.

Signature: (owner/ agent)