



Boarding Agreement

INITIALS:

_____ I certify that my dog/cat's **vaccinations** are *current* during his/her stay, to insure the safety of ALL pets under your care. If not, I *give permission* for North Star Veterinary Hospital to update my pet's vaccinations accordingly and all charges will be added to my bill upon check-out.

_____ For the protection of ALL pets boarding at North Star Veterinary Hospital, they will be administered a Capstar pill (\$4.50), to kill all active **FLEAS** and prevents reinfestation for 24 hours.

_____ I understand that all pets must be checked out **BY 12 pm** on their departure date in order to *avoid* being charged for that day.

_____ In the event your pet becomes injured or sick, every effort will be made to reach the emergency contact with information on symptoms, treatment options, and estimate of cost. If owner/emergency contact can't be reached and medical treatment is deemed necessary, I **authorize** North Star Veterinary Hospital to **treat** my pets and the charges will be added to my bill.

Emergency Contact Information:

Name: _____ Phone: _____ Relationship: _____

Signature: _____ Date: _____