## **Tomball Animal Hospital Boarding Admission Form**

Chart Numbe	er Client Name		Pati	ent Name	
Admission D	ate/Time	Departure Date/Time		Admitted by	
Emergency #	(s)/email:				
All pets boar	ding must be current on vaccination with the pet's veterinarian must be p	ns. If not currently vaccinated at o	our clinic, writte	n proof of vaccinations or	
•	• Unless a quality flea treatment has recently been done, we do require all pets be administered a Capstar on the day of admission and departure. This helps to keep our facility flea-free. If fleas or ticks are found on the pet during the stay, we will treat them as needed, and you will be charged accordingly.				
•	If the pet is to be picked up by som Agent to pick up the pet:			e made with TAH regarding the bill.	
•	All reasonable precautions will be the pet that may cause injury and e		e of the pet. TAF	I is not responsible for the actions of	
•	All pets not picked up within 12 da according to Texas state law.	ays after the expected date of pick	cup will be cons	dered abandoned and will be handled	
•		hat some pets will either be admi	tted with health	the high standard of care we issues, or even become ill while they o proceed with the care of your pet:	
	Treat my pet as needed. Do any diagnostic tests, treatments, and surgeries necessary for the well-being of my pet. I understand I will be responsible for all charges related to the treatment of my pet. If my pet needs to be transferred to a 24 hour emergency facility, I agree to pay for the transfer and the specialty center will contact me directly for payment.				
	<ul> <li> Do NOT do any testing/treatments/surgeries for my pet without my verbal approval.</li> </ul>				
• IF I am unable to the be reached within 24 hours					
	YE	S, treat my pet as needed.			
	NO	, do not treat my animal without	my consent.		
Special thing	s we need to know about your pet:				
Behavioral P	roblems				
Health Proble	ems				
	actions				
	k Amount)				
	Leash Collar			Crate	
employ on-si and 9pm till	te personnel during the week day (I	Monday-Thursday) 9pm-8am and ility will be left unattended durin	l weekend (Frida g those times. H	ession sprinkler system and does not ay- Sunday) hours of 12pm till 4pm towever, we do have a resident living osed.	
Signature:			_ Date:		
Initials:	Date:	In	itials:	Date:	
Initials:	Date:	In	itials:	Date:	