# **Myrtle Avenue Pet Center**

**Phone**:707-443-3171 **Email**: myrtleavepetboarding@gmail.com *Thank you for choosing us for your pet boarding needs!* 

1/2 day cut off is 3pm

Please Initial: \_\_\_\_\_

### **Pet Information**

	Pets Name	Dog/Cat	Gender	Age	Breed/Color
1)					
2)					
3)					
4)					

# **Contact Information**

Owner Name:	Phor	Phone:		
Address:	City:	Zip:		

Leave your email address to receive photos and updates of your pet during their stay!

Email: \_\_\_\_\_

# **Emergency Contact Information**

Please provide the name and daytime phone number of a person who can make decisions regarding your pet on your behalf. This could include anything from questions regarding feeding, behavior or medical care.

Emergency Contact Name:\_\_\_\_\_\_Phone: \_\_\_\_\_Phone: \_\_\_\_\_\_Phone: \_\_\_\_\_\_Phone: \_\_\_\_\_\_Phone: \_\_\_\_\_\_Phone: \_\_\_\_\_Phone: \_\_\_\_Phone: \_\_\_Phone: \_\_\_Phone: \_\_\_Phone: \_\_\_\_Pho

If you would like to authorize another person to pick up or drop off you pet please list them here:

# **Veterinarian Information**

Pet's Veterinarian:

If my veterinarian is not available, or if my emergency contact is unable to provide transportation of my pet(s) to my regular veterinarian, I authorize Myrtle Avenue Veterinary Hospital or Arcata Animal Hospital to perform all necessary care **at my expense**.

## Belongings

Please list and describe your pet(s) belongings:

Collar/Leash:			Harness:	Harness:		
Toys/Othe	r:					
For Staff:	Kennel:	Out:	Add. Serv.:	Groom Appt.:		

Staff Initials: \_\_\_\_\_\_
Date In: \_\_\_\_\_\_

Time In: \_\_\_\_\_

Please Initial

#### **Additional Boarding Services**

\$15 Bath Dogs Under 80lbs\$5 Dental Cleaning\$10 Anal Gland E	xpression
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\_\_\_\_\_\$25 Bath Dogs Over 80lbs \_\_\_\_\_\$5 Ear Cleaning

\_\_\_\_\_\$15 Nail Trim Dog/Cat \_\_\_\_\_\$5 Pet Massage

## Treat Service \$2.00 per day

Who doesn't enjoy special treatment! We now offer a treat service for your pet to enjoy. Included is either 3 biscuits perservice OR a Kong filled with peanut butter!

\_\_\_\_\_Cheese Biscuits \_\_\_\_\_Hickory Biscuits \_\_\_\_\_Peanut Butter Biscuits \_\_\_\_\_Kong w/ Peanut Butter Everyday OR Every other day Please Initial

## Extra Walk \$2.00 per day

Every dog staying with us gets two walks per day as a rule, but if you have a young or active dog, they might benefit from an extra spin around the block!

\_\_\_\_\_Everyday OR \_\_\_\_\_Every other day

### TLC Package \$5.00 per day

Perfect for first time and/or special boarders! This package includes more one on one time with kennel staff, brushing, treats, extra walks and playtime. This will help them feel more comfortable while away from home.

\_\_\_\_\_Everyday OR \_\_\_\_\_Every other day

If you have **multiple pets in the same boarding area:** Occasionally pets boarding together in the same enclosure become aggressive to each other, even if they are close companions. I accept full responsibility for any veterinary charges, injury or death, which may result from boarding my pets in the same enclosure.

Please Initial

Please Initial

Please Initial

I you have a **female in heat boarding:** As it is possible for your female to have been bred prior to being placed in our care, we cannot assume responsibility if a pregnancy does occur. While your pet is boarding with us she will be kept separate from other dogs and will be on a leash when outside her enclosure. If you have any questions about the heat cycle or pregnancy in dogs, please contact your veterinarian.

Please Initial

## **Feeding Instructions**

Please select a feeing option below:				
1) Please feed my pet	cups of DRY food in the	AM	PM	
2) Please feed my pet	cups of WET food in the	AM	PM	
3) Please allow my pet "free choice" feed.	Approxcup(s) per day.			
Please check one of the following:				
OWN food from home	Grain-Free Chicken Formula	Grain-F	ree Red Meat Formula	
Other feeding notes:				

# **Medications/Supplements**

My pet is under the care of a veterinarian and has prescription medication	on	Please Initial	
Name of Medication/Supplement:	Dosage:	Frequency:	
Name of Medication/Supplement:	Dosage:	Frequency:	
Special Instructions for Administering Medications?			

# **Special Care**

If your pet requires any special handling or care (ie. food allergies, behavior issues, history of jumping fences, etc.) please

explain here: \_\_\_\_\_

### **Our Responsibilities**

- We will give the best care we can and provide a safe, healthy environment.
- If you pet does not seem well, we will arrange for prompt veterinary care.
- We will do our best to accommodate pets that require special needs.

### **Your Responsibilities**

- I believe my pet is healthy and free of disease.
- I will inform you if there is any change in my boarding plans.
- I will inform you if my pet has any special needs, diet or medications.
- I will inform you if my pet has any temperament problems which could be a danger to the pet center staff or other animals.
- I will not hold MAPC responsible for any belongings I leave with my pet.
- I understand that despite all reasonable care, my pet may be exposed to communicable disease or become ill or injured while boarding. If this should happen I will not hold MAPC responsible and I authorize MAPC to arrange any necessary veterinary care at my expense.
- I understand that if my pet caused property damage I will be responsible to pay for the damages.
- I understand that MAPC staff is not on the premises from 6pm 8am.
- I understand should I pick up my pet(s) up late with out calling within 24 hours of the scheduled pick up day, I am responsible for paying a \$20.00 fee per pet per day for every day I am late picking up
- I understand that Sunday pick-up is limited to the time frame of 3pm-3:30pm. In order to pick up animals on Sunday, I must pre-arrange at drop-off and pay in full. If payment has not been received, MAPC reserves the right to not release my animal(s) on Sunday.