

2600 Bobcat Boulevard, Suite 100 Trophy Club, Texas, 76262 **Ph:** (682) 237-4002

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Email: info@trophyclubanimalhospital.com

Feline	Boarding	Form
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Pet's Name:	Your Name:	
Emergency Contact Name:	Emergency Contact Phone: _	
Best number(s) for you during travel:		
Date of Drop Off: AM or PM	Date of Pick Up:	AM or PM
Food (Circle One) HOSPITAL FOOD PET'S F		
How much to feed:		
DAILY Medications: (Please List) ALL ME	DICATIONS NEED TO BE I	IN ORIGINAL CONTAINER.
Name of Medication, Strength, Administration	Dose, Frequency of	Has it been given today (Yes or No and what time?)
TCAH provides bedding to all pets during their stay free of is no guarantee that can be made against loss or damage Describe belongings - ALL ITEMS MUST HAVE NAME ON IT:	to items left with your pet during their s	
I acknowledge Trophy Club Animal Hospital is a "flea on an approved flea prevention will receive a single dose of \$17.50, which will be charged to the account. If ticks are f **Current prevention used:	of Senergy to kill any live fleas which ma ound, an additional treatment will be ad	ay be on the pet on the day of arrival for
I acknowledge that charges are per day (not per nigh		edicating/care occurs during the day.
Charges are broken in half-day increments. ARRIVAL: T	here is a half-day charge on the day	y of drop off if the pet is dropped off
after 1 pm. There is a full-day charge if the pet is d		
day of departure if the pet is picked up before noon I acknowledge that proof of vaccinations that meet the		
required. If proof is not provided, a doctor of Trophy Club		
exam, at the owner's expense.	and the second section of the second section of	and the desired and desired at the other standard and desired
I acknowledge Trophy Club Animal Hospital will atten necessary by the medical staff. If Trophy Club Animal Hos		
measures until I can be contacted, at the owner's expense		
I acknowledge that if no attempt on my behalf is mad		
DAILY until my pet is picked up or further arrangements h Pursuant to Texas Law, Trophy Club Animal Hospital		
hours our facility is not open. We are open from 7:30 am t		
employees who care for animals Saturday evening, Sunda		
following holidays: Christmas, Thanksgiving, July 4th, Labo caring for pets in our facility at least 3 times per day on the		ay. However, an employee will be here
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******If you have 2 or more pets boarding with us, pl YES NO N/A My pets should share a cage at all ti		
YES NO N/A My pets need to be separated for fee		
•		
The signature on this document is permission for your pet	to be treated should it become ill. We t	will make
every effort to contact you at the phone numbers we have		
your pet's illness and the expense of treatment. If we are	unable to reach you, treatment will be p	pursued at the owner's expense.
Signature: Date: _		