



BOARDING CONSENT FORM

First and Last Name:

Address:

Phone:

In leaving my pet for care and boarding at Montgomery Veterinary Associates LLC (MVA), I am aware that certain medical problems may arise during his/her stay. Understanding this, I give my permission to the doctors and staff of MVA to treat my pet as may be deemed necessary. I also understand that if treatment is necessary, I will be responsible for any charges at the time of my pet's discharge. In case of medical emergency, MVA will make every attempt to contact me or a responsible party of my choice, at the number listed below, for further permission to provide medical care. But MVA will always proceed in the best interest and health of my pet.

Without prior arrangements, I understand that I am not allowed to pick up my animal during any non business hours. Staff is not permitted to release any pets while they are here during non business hours. Should circumstances necessitate leaving my pet beyond the scheduled go home date, I will notify MVA with updated departure information. Failure to call within 10 days after original departure date may result in my pet being considered abandoned.

STANDARD PICK-UP TIME

- Monday – Friday** **7:00-6:00pm – If bathed, pick up time is after 2:00pm**
- Saturday** **7:30-12:00pm**
- Sunday** **4:30-5:00pm (Sunday pick-ups will be charged for Sunday night)**

(Your pet will be bathed the FRIDAY before if you are picking up on a WEEKEND)

We also give Capstars (flea preventative) at time of check-in for boarding. We charge \$3.60. We are a flea free clinic and this helps ensure that we stay a flea free clinic.

*While all attempts are made to care for personal items left at MVA, items such as (but not limited to) toys, blankets, leashes, carriers, etc. can be lost or damaged. We **strongly discourage** the leaving of personal items with your pet. MVA is not responsible for any personal items that may be lost or damaged during your pet's stay.

Pets Arrival Date _____ Pets Departure Date _____

Phone where I can be reached while I am away _____

The name & number of a responsible party of my choosing

Name _____ Number _____

Relationship to you _____

Signed _____ <DATE>

Would you like text or email updates of your pet while he/she is boarding? Give us your Cell phone number or Email address. Thank you for choosing MVA!