

Golden Valley Animal Hospital
 651 Winnetka Avenue North
 Golden Valley, MN 55427
 763-546-2323



Greenbrier Animal Hospital
 11040 Cedar Lake Road
 Minnetonka, MN 55305
 952-542-1012

BOARDING INSTRUCTION FORM

Owner's Name: _____ Date: _____

Animal's Name: _____ Species: Dog Cat Other (specify) _____

MEDICATIONS

All medications need to be labeled, preferably in their original bottle. Please list all medications your pet is on below:

MEDICATION (Name and Strength Ex: Benadryl 25mg)	DOSE (How much? Ex: 1/2 tablet)	INSTURCTIONS (How often? Ex: once a day in the morning)

FEEDING

Please list all instructions for feeding below:

Did you bring your own food? Yes No Name/Brand of regular diet: _____

Did you portion your pet's food into individual feedings? Yes No If no, please fill out the portion below.

Feeding Instructions	Type (dry or wet)	How much? (Ex: 1/2 cup twice a day)	Any Special Instructions?
AM Feeding			
PM Feeding same as above? <input type="checkbox"/>			

FLEA CONTROL

Frontline Gold will be applied when boarding if not applied prior to drop off during flea/tick season.

Has your pet had a flea/tick preventive applied in the last 30 days? Yes ** No

**If yes, what product was used? _____ Date it was applied? _____

OTHER INFORMATION

Is your dog aggressive toward other dogs? (If yes, please describe below) Yes No

Is your pet aggressive toward people? (If yes, please describe below) Yes No

Other items you are bringing with your pet (please provide detailed descriptions of collars, leashes, toys, etc.):

Is there anything else you feel we should know?

OFFICE USE ONLY

Staff Initials _____